

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

36

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Tom D
STAVINO MA

OFFICE USE ONLY

Date Received

Fort B Fort Bend

JAN 11 2008

Elections Dept.

Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE

☐ Change of Address

10420 WILL LEHMAN
NEEDVILLE TX 77461

5 CANDIDATE /
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(979) 793 4313

Receipt #

Amount

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Pam
VACEK

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE # CITY STATE ZIP CODE

11444 FM 361 RICHMOND TX 77469

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(979) 793 6929

9 REPORT TYPE

☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year

7 / 1 / 07 # THROUGH 12 / 31 / 07

11 ELECTION

ELECTION DATE
Month Day Year

ELECTION TYPE

/ /

☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

7BC Commissioner Pet I

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address / PO Box Apt. / Suite # City State Zip Code

☐ additional pages

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Tom Stavinoha

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages18 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)\$ 75,650.⁰⁰EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 38,091.²⁵CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

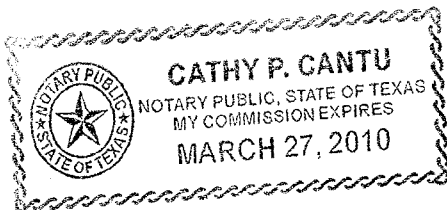
\$

44,764.²⁵OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

19 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Tom Stavinoha

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tom Stavinoha, this the 11 day of January, 20 08, to certify which, witness my hand and seal of office.

Cathy P. Cantu

Cathy P. Cantu

Notary Public

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

19

2 FILER NAME

Tom Stavino HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/17/07

5 Full name of contributor

☐ out-of-state PAC (ID#)

MELISSA A DORE

6 Contributor address; City; State; Zip Code

11811 Moss Branch Rd
Houston TX 77043

7 Amount of contribution (\$)

1000⁰⁰

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

7/17/07

Full name of contributor

☐ out-of-state PAC (ID#)

JAMES CARTWRIGHT

Contributor address; City; State; Zip Code

15914 PEBBLE CREEK TRL
CYPRESS TX 77433-5401

Amount of contribution (\$)

1000⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

7/17/07

Full name of contributor

☐ out-of-state PAC (ID#)

Jim Roberts

Contributor address; City; State; Zip Code

10015 SABLE MEADOWS CT
Houston TX 77064

Amount of contribution (\$)

1000⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

7/16/07

Full name of contributor

☐ out-of-state PAC (ID#)

Patricia Lipke

Contributor address; City; State; Zip Code

19 FLAMINGO
Rockport TX 78382-3717

Amount of contribution (\$)

2000⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

7/6/07

Full name of contributor

☐ out-of-state PAC (ID#)

ARCADIS GEM INC. TX PAC

Contributor address; City; State; Zip Code

11490 WESTHEIMER # 600
Houston TX 77077

Amount of contribution (\$)

1000⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

Tom Staudenmaier

3 ACCOUNT # (Ethics Commission files)

4 Date

8/29/07

5 Full name of contributor

☐ out-of-state PAC (ID#)

DAVID SADEGHPOUR

6 Contributor address; City; State; Zip Code

701 SHEPHERD #200
HOUSTON TX 77007

7 Amount of contribution (\$)

2500⁰⁰

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

ENGINEERING

10 Employer (See Instructions)

Date

9/29/07

Full name of contributor

☐ out-of-state PAC (ID#)

DON WENZEL

Contributor address; City; State; Zip Code

14140 FRANCIS
NEEDVILLE TX 77461

Amount of contribution (\$)

450⁰⁰

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Contractor

Employer (See Instructions)

Date

9/27/07

Full name of contributor

☐ out-of-state PAC (ID#)

DAVID EASTWOOD

Contributor address; City; State; Zip Code

800 VICTORIA DR
HOUSTON TX 77022

Amount of contribution (\$)

1000⁰⁰

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

TESTING LAB

Employer (See Instructions)

Date

10/2/07

Full name of contributor

☐ out-of-state PAC (ID#)

Ventana Development BRADLEY LLC

Contributor address; City; State; Zip Code

142 CR 222
Bay City TX 77414

Amount of contribution (\$)

1500⁰⁰

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

LAND Development

Employer (See Instructions)

Date

10/2/07

Full name of contributor

☐ out-of-state PAC (ID#)

MARY A. MIKSETH

Contributor address; City; State; Zip Code

PO Box 23
NEEDVILLE TX 77461

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

Tom Stawno HA

3 ACCOUNT # (Ethics Commission files)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/1/07

BEN LEDNICKY

6 Contributor address; City; State; Zip Code

PO Box 770217

Houston TX 77215

100⁰⁰

9 Principal occupation \ Job title (See Instructions)

LAND SCAPING

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/8/07

Steve Costello

Contributor address; City; State; Zip Code

9990 RICHMOND AVE N BLDG # 450
Houston TX 770421000⁰⁰

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/3/07

James Russ

Contributor address; City; State; Zip Code

10555 WESTOFFICE DR
Houston TX 77042750⁰⁰

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/3/07

THOMAS EDWINSTER III

Contributor address; City; State; Zip Code

1126 BANKS ST.
Houston TX 77006750⁰⁰

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/8/07

TSC FUND

Contributor address; City; State; Zip Code

3300 S. GESSNER #100
Houston TX 77063

500

Principal occupation \ Job title (See Instructions)

ENGINEERS

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A: *

2 FILER NAME

Tom Stavinoha

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/10/07

5 Full name of contributor

☐ out-of-state PAC (ID#)

Glenn E Johnson

6 Contributor address; City; State; Zip Code

12326 QUEENS BAY
HOUSTON TX 77024-41267 Amount of
contribution (\$)500⁰⁰8 In-kind contribution
description (if applicable)

9 Principal occupation \ Job title (See Instructions)

ENGINEER

10 Employer (See Instructions)

Date

10/10/07

Full name of contributor

☐ out-of-state PAC (ID#)

Dick Gay

Contributor address; City; State; Zip Code

10777 Westheimer #400
HOUSTON TX 77042Amount of
contribution (\$)2500⁰⁰In-kind contribution
description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

10/9/07

Full name of contributor

☐ out-of-state PAC (ID#)

Rick Stangle

Contributor address; City; State; Zip Code

12327 SCOTT'S DALE DR
MEADOWS PLACE #77477Amount of
contribution (\$)500⁰⁰In-kind contribution
description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

10/9/07

Full name of contributor

☐ out-of-state PAC (ID#)

Bobby White

Contributor address; City; State; Zip Code

PO Box 3035
LIBERTY TX 77575Amount of
contribution (\$)1000⁰⁰In-kind contribution
description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

10/10/07

Full name of contributor

☐ out-of-state PAC (ID#)

Peyton Martin

Contributor address; City; State; Zip Code

310 Martin St #280
RICHMOND TX 77464Amount of
contribution (\$)1000⁰⁰In-kind contribution
description (if applicable)

Principal occupation \ Job title (See Instructions)

DEVELOPER

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Stavino HN</i>				3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/15/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID#: <i>BILL LINTHICUM</i>		7 Amount of contribution (\$) <i>100⁰⁰</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>22622 ARBOR STREAM DR KATY TX 77450-8242</i>					
9 Principal occupation \ Job title (See Instructions) <i>SOLID WASTE</i>			10 Employer (See Instructions)		
Date <i>10/11/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>DALE CONGER</i>		Amount of contribution (\$) <i>500⁰⁰</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>16202 ST. HELIER DR HOUSTON TX 77040</i>					
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		
Date <i>10/10/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>GARY COOK</i>		Amount of contribution (\$) <i>1000</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>8101 DESCENT JEWEL CIRCLE LAS VEGAS NV 89128</i>					
Principal occupation \ Job title (See Instructions) <i>DEVELOPER</i>			Employer (See Instructions)		
Date <i>10/11/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>HARRY JOHNSON</i>		Amount of contribution (\$) <i>1000⁰⁰</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>5005 RIVERWAY 500 HOUSTON TX 77056-2196</i>					
Principal occupation \ Job title (See Instructions) <i>DEVELOPER</i>			Employer (See Instructions)		
Date <i>10/10/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>SUSIE ALLEMAN</i>		Amount of contribution (\$) <i>100⁰⁰</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>14507 RIVER FOREST DR HOUSTON TX 77079-6519</i>					
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: _____	
2 FILER NAME <i>Tom Stavino HA</i>		3 ACCOUNT # (Ethics Commission filers) _____	
4 Date <i>10/10/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID# _____) <i>DR. JOE MANDOLA</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>502 Hwy 901 Richmont TX 77469</i>			
9 Principal occupation \ Job title (See Instructions) <i>VET</i>		10 Employer (See Instructions)	
Date <i>10/12/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Darryl Carter</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11501 IVORY CREEK DR PEARLAND TX 77584-8221</i>			
Principal occupation \ Job title (See Instructions) <i>LAWYER</i>		Employer (See Instructions)	
Date <i>10/2/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>ANDREWS, KURT H TOMS PAC</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>600 TRAVIS #4200 HOUSTON TX 77002</i>			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/4/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>SOUTHWEST 545 LP</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>96 GREENWOOD PLAZA #2900 HOUSTON TX 77046</i>			
Principal occupation \ Job title (See Instructions) <i>DEVELOPER</i>		Employer (See Instructions)	
Date <i>10/16/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Jim Harrison</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>310 MORTON ST #369 RICHMOND TX 77465</i>			
Principal occupation \ Job title (See Instructions) <i>RANCHER</i>		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Stagnaro HA</i>				3 ACCOUNT # (Ethics Commission files)	
4 Date <i>10/19/07</i>	5 Full name of contributor <i>Billy Benton</i>	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>1509 BEAR BIA ROSENBERG TX 77471</i>					
9 Principal occupation / Job title (See Instructions) <i>BALE BOARD</i>			10 Employer (See Instructions)		
Date <i>10/19/07</i>	Full name of contributor <i>Milton Koy</i>	☐ out-of-state PAC (ID#)	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>4713 RANSOM RICHMOND TX 77469</i>					
Principal occupation / Job title (See Instructions) <i>CONCRETE SUPPLIER</i>			Employer (See Instructions)		
Date <i>10/15/07</i>	Full name of contributor <i>HAROLD COBB</i>	☐ out-of-state PAC (ID#)	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>12102 ARAOYO VERDE HOUSTON TX 77041</i>					
Principal occupation / Job title (See Instructions) <i>TESTING LAB</i>			Employer (See Instructions)		
Date <i>10/16/07</i>	Full name of contributor <i>TYLER TADD</i>	☐ out-of-state PAC (ID#)	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>PO Box 27267 HOUSTON TX 77227-7267</i>					
Principal occupation / Job title (See Instructions) <i>DEVELOPER</i>			Employer (See Instructions)		
Date <i>10/12/07</i>	Full name of contributor <i>B.B. BASS</i>	☐ out-of-state PAC (ID#)	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>1124 DAWSON ROSENBERG TX 77471</i>					
Principal occupation / Job title (See Instructions) <i>CONTRACTOR/BUILDER</i>			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this Schedule A:	
2 FILER NAME <i>TOM STAVINO HA</i>				3 ACCOUNT # (Ethics Commission files)	
4 Date <i>10/19/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Arthur Guy</i>		7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)	
	6 Contributor address; City; State; Zip Code <i>5300 Silver Belle Richmond TX 77469</i>				
9 Principal occupation \ Job title (See Instructions) <i>Developer - Builder</i>			10 Employer (See Instructions)		
Date <i>10/15/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>KEITH STEFFER</i>		Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code <i>26811 Willow Ln Katy TX 77494-5421</i>				
Principal occupation \ Job title (See Instructions) <i>Surveyor</i>			Employer (See Instructions)		
Date <i>10/17/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Clinton Wong</i>		Amount of contribution (\$) <i>2500.00</i>	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code <i>7676 Woodway #238 Houston TX 77063</i>				
Principal occupation \ Job title (See Instructions) <i>Developer</i>			Employer (See Instructions)		
Date <i>10/18/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Tom Stuart</i>		Amount of contribution (\$) <i>1500.00</i>	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code <i>7525 7th 723 Richmond TX 77469</i>				
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		
Date <i>10/17/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>John Hull</i>		Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code <i>218 KESWICK SUGARLAND TX 77478</i>				
Principal occupation \ Job title (See Instructions) <i>Auditor</i>			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Stagno HA</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/11/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID#) <i>Allen Boone Humphreys LLP</i>	7 Amount of contribution (\$) <i>1500</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3200 SW Fwy # 2000 Houston TX 77027</i>			
9 Principal occupation \ Job title (See Instructions) <i>ATTORNEYS</i>		10 Employer (See Instructions)	
Date <i>10/18/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>NICK ASCHLIMAN</i>	Amount of contribution (\$) <i>250</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4129 University BLVD Houston TX 77005-2713</i>			
Principal occupation \ Job title (See Instructions) <i>TESTING LAB.</i>		Employer (See Instructions)	
Date <i>10/15/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>MARK HEIDAKER</i>	Amount of contribution (\$) <i>1500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5315 FARM WEATHER KATY TX 77450</i>			
Principal occupation \ Job title (See Instructions) <i>LAND ACQUISITION</i>		Employer (See Instructions)	
Date <i>10/16/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>LES NEWTON</i>	Amount of contribution (\$) <i>500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3506 MESQUITE DR SUGAR LAND TX 77478</i>			
Principal occupation \ Job title (See Instructions) <i>DEVELOPMENT</i>		Employer (See Instructions)	
Date <i>10/15/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>JAMES MOEHLMAN</i>	Amount of contribution (\$) <i>2500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6311 N WOODS LN. KATY TX 77494</i>			
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

TIM STAGNINO WA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

JIM ROBERTS

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

10015 SABLE MEADOWS CT
Houston TX 77064500⁰⁰

9 Principal occupation \ Job title (See Instructions)

ENGINEER

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

PARKWAY LAKES MASTER

Contributor address; City; State; Zip Code

21711 FM 1093
RICHMOND TX 77469

Amount of contribution (\$)

In-kind contribution description (if applicable)

5000⁰⁰

Principal occupation \ Job title (See Instructions)

Development

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Home-Pac Greater Houston

Contributor address; City; State; Zip Code

9511 W. Sam Houston Parkway N
Houston TX 77064

Amount of contribution (\$)

In-kind contribution description (if applicable)

1000⁰⁰

Principal occupation \ Job title (See Instructions)

Builders

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

CLR/PAC

Contributor address; City; State; Zip Code

7600 W. TIDWELL
Houston TX 77040

Amount of contribution (\$)

In-kind contribution description (if applicable)

1000⁰⁰

Principal occupation \ Job title (See Instructions)

ENGINEERS

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

HomePac Greater Houston Builders Assn

Contributor address; City; State; Zip Code

9511 W. Sam Houston Parkway N
Houston TX 77064

Amount of contribution (\$)

In-kind contribution description (if applicable)

100⁰⁰

Principal occupation \ Job title (See Instructions)

Builders

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Stajano HA</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/23/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID#) <i>Carla Thompson</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>11606 Field Brook Houston TX 77077-5014</i>			
9 Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>		10 Employer (See Instructions)	
Date <i>10/23/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>PERDUE, BRANDON, FIELDER, COLLIER</i>	Amount of contribution (\$) <i>1500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1235 North Loop W # 600 Houston TX 77008</i>			
Principal occupation \ Job title (See Instructions) <i>ATTORNEYS</i>		Employer (See Instructions)	
Date <i>10/23/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>TCB PAC</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5757 Woodward # 101 W Houston TX 77057</i>			
Principal occupation \ Job title (See Instructions) <i>ENGINEERS</i>		Employer (See Instructions)	
Date <i>10/23/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>John Hall</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7811 DASHWOOD Houston TX 77036-4939</i>			
Principal occupation \ Job title (See Instructions) <i>Application Development</i>		Employer (See Instructions)	
Date <i>10/17/07</i>	Full name of contributor ☐ out-of-state PAC (ID#) <i>LINDBERGER, COBBAN, BLAIR, SAMPSON</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 17428 Austin TX 78728</i>			
Principal occupation \ Job title (See Instructions) <i>ATTORNEYS</i>		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this Schedule A:	
2 FILER NAME <i>TOM STANUO HA</i>				3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>10/23/07</i>	5 Full name of contributor <i>MURLENE ASKEW</i> ☐ out-of-state PAC (ID#)	6 Contributor address; City; State; Zip Code <i>1202 FM 359 Richardson TX 74669</i>	7 Amount of contribution (\$) <i>25.00</i>	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions) <i>RETRAO</i>			10 Employer (See Instructions)		
Date <i>10/23/07</i>	Full name of contributor <i>TOM RAMSEY</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>8729 BURNHART HOUSTON TX 77055</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		
Date <i>10/23/07</i>	Full name of contributor <i>JACK MCLANDER</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>6 HERITAGE LANE MAGNOLIA TX 77354</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <i>10/22/07</i>	Full name of contributor <i>JEFF CANNON</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>4315 WHICK HAWK FULSHEAR TX 77441</i>	Amount of contribution (\$) <i>2500.00</i>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		
Date <i>10/23/07</i>	Full name of contributor <i>RANNY Mc DONOUGH</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>4535 EVERGREEN BELLAIR TX 77401</i>	Amount of contribution (\$) <i>500</i>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <i>ENGINEER</i>			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: _____	
2 FILER NAME <i>Tom Stajino HA</i>		3 ACCOUNT # (Ethics Commission files) _____	
4 Date <i>10/23/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Bill Othon</i>	7 Amount of contribution (\$) <i>500</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>10802 OVERBROOK HOUSTON TX 77042</i>			
9 Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>		10 Employer (See Instructions)	
Date <i>10/23/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>LEE LEAMAN</i>	Amount of contribution (\$) <i>2500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>702 Foster Dr RICHMOND TX 77469</i>			
Principal occupation \ Job title (See Instructions) <i>Concrete Production</i>		Employer (See Instructions)	
Date <i>10/23/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Rose Askew</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>20418 Hwy 36 GUY TX 77444</i>			
Principal occupation \ Job title (See Instructions) <i>Secretary</i>		Employer (See Instructions)	
Date <i>10/21/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Robert Mc Dermott</i>	Amount of contribution (\$) <i>1500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6911 Hickey Creek Ln DALLAS TX 75252</i>			
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>		Employer (See Instructions)	
Date <i>10/19/07</i>	Full name of contributor ☐ out-of-state PAC (ID# _____) <i>Brent Lapsley</i>	Amount of contribution (\$) <i>1500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2501 CENTRAL PARKWAY A3 HOUSTON TX 77092</i>			
Principal occupation \ Job title (See Instructions) <i>ENGINEER</i>		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

Tom Stajano HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/23/07

5 Full name of contributor

☐ out-of-state PAC (ID#)

John Van De Wiele

6 Contributor address; City; State; Zip Code

1715 Mossy Stone Dr
Houston TX 77077

7 Amount of contribution (\$)

2500⁰⁰

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

ENGINEER

10 Employer (See Instructions)

Date

10/23/07

Full name of contributor

☐ out-of-state PAC (ID#)

DARABU KADERKA

Contributor address; City; State; Zip Code

17713 White Oak Hill
Cypress TX 77429

Amount of contribution (\$)

500⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

ENGINEER

Employer (See Instructions)

Date

10/23/07

Full name of contributor

☐ out-of-state PAC (ID#)

CC LEE

Contributor address; City; State; Zip Code

6313 Sky Line
Houston TX 77057

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Architect

Employer (See Instructions)

Date

10/23/07

Full name of contributor

☐ out-of-state PAC (ID#)

Joan Cain

Contributor address; City; State; Zip Code

2924 Blue Meadow
Sugar Land TX 77479

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Political Advisor

Employer (See Instructions)

Date

10/11/07

Full name of contributor

☐ out-of-state PAC (ID#)

Tom Miller

Contributor address; City; State; Zip Code

3193 Franklin Ln
Southlake TX 76092

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Landscape Material

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Struvin WA</i>				3 ACCOUNT # (Ethics Commission files)	
4 Date <i>10/15/07</i>	5 Full name of contributor <i>JOE SWINBANK</i> ☐ out-of-state PAC (ID#)	6 Contributor address; City; State; Zip Code <i>PO Box 19129 Houston TX 77224</i>	7 Amount of contribution (\$) <i>250⁰⁰</i>	8 In-kind contribution description (if applicable)	
9 Principal occupation \ Job title (See Instructions) <i>Land fill</i>			10 Employer (See Instructions)		
Date <i>10/15/07</i>	Full name of contributor <i>Don Pearce</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>#2 CARSEY LANE Houston TX 77024</i>	Amount of contribution (\$) <i>250⁰⁰</i>	In-kind contribution description (if applicable)	
Principal occupation \ Job title (See Instructions) <i>LAND-FILL</i>			Employer (See Instructions)		
Date <i>10/22/07</i>	Full name of contributor <i>BERG-OLIVER, Inc.</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>14701 SAINT MARCUS LN Houston TX 77079-2932</i>	Amount of contribution (\$) <i>250⁰⁰</i>	In-kind contribution description (if applicable)	
Principal occupation \ Job title (See Instructions) <i>BED TESTING LABS</i>			Employer (See Instructions)		
Date <i>10/23/07</i>	Full name of contributor <i>MICHAEL SMITH</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>2919 DAYTON SPRINGS DR MANUEL TX 77578</i>	Amount of contribution (\$) <i>1250⁰⁰</i>	In-kind contribution description (if applicable)	
Principal occupation \ Job title (See Instructions) <i>DEVELOPMENT</i>			Employer (See Instructions)		
Date <i>10/22/07</i>	Full name of contributor <i>Doug Goff</i> ☐ out-of-state PAC (ID#)	Contributor address; City; State; Zip Code <i>20 Grants Lake Circle Sugar Land TX 77479</i>	Amount of contribution (\$) <i>1250⁰⁰</i>	In-kind contribution description (if applicable)	
Principal occupation \ Job title (See Instructions) <i>Development</i>			Employer (See Instructions)		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

Tom Stagno HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/30/07

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JACK MILLER

7 Amount of
contribution (\$)1000⁰⁰8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

13703 BARRY KNOLL
HOUSTON, TX 77079

9 Principal occupation \ Job title (See Instructions)

ENGINEERING

10 Employer (See Instructions)

Date

10/31/07

Full name of contributor

☐ out-of-state PAC (ID# _____)

SARAH C. ANDERELL

Amount of
contribution (\$)50⁰⁰In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

8810 SILENT WILLOW
SUGARLAND TX 77479

Principal occupation \ Job title (See Instructions)

Chemical Manufacturing

Employer (See Instructions)

Date

10/31/07

Full name of contributor

☐ out-of-state PAC (ID# _____)

THE PBST CORPORATION PAC

Amount of
contribution (\$)

500

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

5300 W. CYPRUS ST #200
TAMPA FL 33607

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

10/25/07

Full name of contributor

☐ out-of-state PAC (ID# _____)

ALLIED WASTE EMPLOYEES BETTER GOVT PAC

Amount of
contribution (\$)500⁰⁰In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

PHOENIX, AZ 85054
18500 NORTH ALLIED WAY

Principal occupation \ Job title (See Instructions)

WASTE

Employer (See Instructions)

Date

11/7/07

Full name of contributor

☐ out-of-state PAC (ID# _____)

REPUBLICAN PARTY OF TEXAS

Amount of
contribution (\$)800⁰⁰In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

PO BOX 1987
SUGARLAND TX 77487-1987

Principal occupation \ Job title (See Instructions)

REFUND FOR NEWS LETTER

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2 FILER NAME

Tom Stajano HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

12/17/07

George Klein Peter

6 Contributor address; City; State; Zip Code

8641 United Plaza # 301

Baton Rouge LA 70809-2002

1000⁰⁰

9 Principal occupation \ Job title (See Instructions)

ENGINEER

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)Amount of
contribution (\$)In-kind contribution
description (if applicable)

12/18/07

Dennis McAfee

Contributor address; City; State; Zip Code

6108 FM 723

Richmond TX 77464

50⁰⁰

Principal occupation \ Job title (See Instructions)

FENCE OFFICER

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)Amount of
contribution (\$)In-kind contribution
description (if applicable)

12/17/07

Jim Roberts

Contributor address; City; State; Zip Code

10015 SABLE MEADOW CT

Houston TX 77064

1000⁰⁰

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)Amount of
contribution (\$)In-kind contribution
description (if applicable)

12/17/07

Harold Cobb

Contributor address; City; State; Zip Code

12102 ARROYA VERDE

Houston TX 77041-5749

1000⁰⁰

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)Amount of
contribution (\$)In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME <i>Tom Stagno HA</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>12/20/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID#: <i>BEN LEDNICKY</i>	7 Amount of contribution (\$) <i>50.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>PO Box 770217 Houston TX 77215</i>			
9 Principal occupation \ Job title (See Instructions) <i>Land Scape</i>		10 Employer (See Instructions)	
Date <i>12/20/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>SOUTHWEST 545 LP</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9 GREENWAY PLAZA #2900 Houston TX 77046</i>			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date <i>12/17/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>GARY FINCH</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1103 FM 359 Richmond TX 77469</i>			
Principal occupation \ Job title (See Instructions) <i>Dentist</i>		Employer (See Instructions)	
Date <i>12/20/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>MARK HEIDAKER</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7703 BREEZE WAY BEND LA Katy TX 77444</i>			
Principal occupation \ Job title (See Instructions) <i>ROW ACQUISITION</i>		Employer (See Instructions)	
Date <i>12/19/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>ROBERT FERGUSON</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>21711 FM 1093 Richmond TX 77469</i>			
Principal occupation \ Job title (See Instructions) <i>Development</i>		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

15

2 FILER NAME

Tom Stavano HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

7/5/07

Knights of Columbus 7067

6 Payee address; City; State; Zip Code

PO Box 613

Needville

77461

50⁰⁰

8 Purpose of payment (See instructions regarding type of information required.)

Rental of Pavilion for
Red Cross Function

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

7/12/07

University of Houston

Payee address; City; State; Zip Code

Houston / Sugar Land

45⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Alumni Dues

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

7/15/07

Beasley Fire Dept

Payee address; City; State; Zip Code

Beasley

50⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Donation

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

8/3/07

Fort Bend Chamber of Commerce

Payee address; City; State; Zip Code

Sugar Land

10⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Infrastructure
Breakfast

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME <i>TIM STAGIWO HA</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>12/18/07</i>	5 Full name of contributor ☐ out-of-state PAC (ID#: <i>GARY COOK</i> 6 Contributor address; City; State; Zip Code <i>8101 DESERT JEWEL CIRCLE LAS VEGAS NV 89128</i>	7 Amount of contribution (\$) <i>1000</i>	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions) <i>DEVELOPMENT</i>		10 Employer (See Instructions)	
Date <i>12/17/07</i>	Full name of contributor ☐ out-of-state PAC (ID#: <i>JOE LEE</i> Contributor address; City; State; Zip Code <i>720 BLEN OVEN DA ALPHARETTA, GA 30004</i>	Amount of contribution (\$) <i>500</i>	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Tom Spaulino HA</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>8/3/07</i>	5 Payee name <i>Ducks Unlimited</i> 6 Payee address; City; State; Zip Code <i>c/o Hurley Johnson ROSENBERG CHAPTER</i>	7 Amount (\$) <i>40.00</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>DONATION</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>8/15/07</i>	Payee name <i>Knights of Columbus 4th Degree</i> Payee address; City; State; Zip Code <i>Roseburg</i>	Amount (\$) <i>305.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>DONATION</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>8/16</i>	Payee name <i>Wharton County Jr. College Foundation</i> Payee address; City; State; Zip Code <i>Wharton, Tx</i>	Amount (\$) <i>650.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>DONATION</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date <i>8/19/07</i>	Payee name <i>Needville Fire Dept</i> Payee address; City; State; Zip Code <i>NEEDVILLE</i>	Amount (\$) <i>240.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>DONATION</i>		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: -

2 FILER NAME

Tom Spawino Hat

3 ACCOUNT # (Ethics Commission filers)

4 Date

8/22

5 Payee name

RICHMOND BONE AND JOINT FOUNDATION

6 Payee address; City; State; Zip Code

RICHMOND

7 Amount (\$)

250⁰⁰

8 Purpose of payment (See instructions regarding type of information required.)

GOLF TOURNAMENT HOLE SPONSOR

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

8/26

Payee name

FORT BEND SENIOR CITIZENS

Payee address; City; State; Zip Code

Amount (\$)

400⁰⁰

Purpose of payment (See instructions regarding type of information required.)

DONATION TO GROWNY PTY.

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

8/27/07

Payee name

HOLY ROSARY CHURCH

Payee address; City; State; Zip Code

ROSENBERG

Amount (\$)

150⁰⁰

Purpose of payment (See instructions regarding type of information required.)

DONATION

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

8/30/07

Payee name

ROSENBERG RAILROAD MUSEUM

Payee address; City; State; Zip Code

ROSENBERG

Amount (\$)

130⁰⁰

Purpose of payment (See instructions regarding type of information required.)

DONATION

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Stagno HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

8/30/07

5 Payee name

City of ROSENBERG

6 Payee address;

City; State; Zip Code

7 Amount (\$)

712.50

8 Purpose of payment (See instructions regarding type of information required.)

Rental of Civic Center for JAN 9 2008 BREAKFAST

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

9/2/07

Payee name

NEEDVILLE CHAMBER of Commerce

Payee address;

City; State; Zip Code

Amount (\$)

40.00

Purpose of payment (See instructions regarding type of information required.)

Hole SPONSOR for TOURNAMENT

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

9/11/07

Payee name

FORT BEND County Fair Ass'n

Payee address;

City; State; Zip Code

Amount (\$)

250.00

Purpose of payment (See instructions regarding type of information required.)

SIGNAGE @ FAIR

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

9/12/07

Payee name

POPPA'S AND GRANNYS CRAFTS

Payee address;

City; State; Zip Code

12863 HARV CR 314

NAVASOTA TX 77868

Amount (\$)

438.41

Purpose of payment (See instructions regarding type of information required.)

ICE CHESTS (3)
Needville Harvest Fest
St. Michaels Church, Needville Sr. Citizens

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Stavano HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

9/24/07

Rose/ Rich Chamber of Commerce

6 Payee address; City; State; Zip Code

25⁰⁰

8 Purpose of payment (See instructions regarding type of information required.)

Sept. Luncheon

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

9/24/07

ROSENBERG RAILROAD MUSEUM

Payee address; City; State; Zip Code

ROSENBERG

400⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Donation

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

9/24/07

H. BEND County Fair Ass'n Scholarship

Payee address; City; State; Zip Code

100⁰⁰

Purpose of payment (See instructions regarding type of information required.)

BUSINESS MEETING REPAIRING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

9/25

KAREN PEARSON

Payee address; City; State; Zip Code

SUGAR LAND

600⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Campaign Promotion
@ FAIR, HARVEST FEST / KATY FEST.

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Stavano NA

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/28/07

5 Payee name

City of Richmond

6 Payee address; City; State; Zip Code

7 Amount (\$)

15⁰⁰

8 Purpose of payment (See instructions regarding type of information required.)

MAYORS MTG MEAL

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date

9/30/07

Payee name

U-H Scholarship

Payee address; City; State; Zip Code

SUBARU CAMPUS

Amount (\$)

250⁰⁰

Purpose of payment (See instructions regarding type of information required.)

DONATION

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date

10/2/07

Payee name

RICHMOND PD BIRTH CLASSIC

Payee address; City; State; Zip Code

RICHMOND

Amount (\$)

100⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Hole SPONSOR

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date

10/8/07

Payee name

REPUBLICAN PARTY of Fort Bend County

Payee address; City; State; Zip Code

Amount (\$)

800⁰⁰

Purpose of payment (See instructions regarding type of information required.)

1/2 page Ad in News LETTER

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Stavinoha

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

10/8

Tom Stavinoha
 Payee address; City; State; Zip Code
 NEEDVILLE

233.69

8 Purpose of payment (See instructions regarding type of information required.)

County Fair Cowboy
 Camp Supplies

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

10/11/07

Milton Wright Campaign
 Payee address; City; State; Zip Code

500.00

Purpose of payment (See instructions regarding type of information required.)

Donation to Campaign

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

10/15/07

DAVID MEYER FBE Boot Camp
 Payee address; City; State; Zip Code

55.00

Purpose of payment (See instructions regarding type of information required.)

GLORIA SWING for
 EAST BERNARD HOLY CROSS

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

10/15/07

SACRED HEART Church
 Payee address; City; State; Zip Code

Richmond

300.00

Purpose of payment (See instructions regarding type of information required.)

Donation

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)
4 Date 10/15/07	5 Payee name City of ROSENBERG 6 Payee address; City; State; Zip Code	7 Amount (\$) 250.00
8 Purpose of payment (See instructions regarding type of information required.) Christmas in Rosenberg SPONSOR		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 10/16/07	Payee name Fort Bend County Fair Ass'n Payee address; City; State; Zip Code	Amount (\$) 5650.00
Purpose of payment (See instructions regarding type of information required.) Donation		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 10/16/07	Payee name Fort Bend County Sheriff's Ass'n Payee address; City; State; Zip Code	Amount (\$) 100.00
Purpose of payment (See instructions regarding type of information required.) Hole sponsor for GOLF TOURNAMENT		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 10/17/07	Payee name Rio Brazos Hunting Preserve Payee address; City; State; Zip Code PO Box 531 Simonton TX 77476	Amount (\$) 600.00
Purpose of payment (See instructions regarding type of information required.) Hunt Donation to Republican Party Lincoln Dinner		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Tom Strauss Jr.</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>10/29/07</i>	5 Payee name <i>St. Michaels Church</i> 6 Payee address; City, State; Zip Code <i>Needville</i>	7 Amount (\$) <i>795⁰⁰</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Donation</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>10/2/07</i>	Payee name <i>Rose / Rich Chamber</i> Payee address; City, State; Zip Code <i>Rosenberg</i>	Amount (\$) <i>25⁰⁰</i>
Purpose of payment (See instructions regarding type of information required.) <i>Luncheon</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>10/4/07</i>	Payee name <i>Emmanuel United Church of Christ</i> Payee address; City, State; Zip Code <i>Needville</i>	Amount (\$) <i>90⁰⁰</i>
Purpose of payment (See instructions regarding type of information required.) <i>Donation</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>10/11/01</i>	Payee name <i>Rosenberg American Legion</i> Payee address; City, State; Zip Code <i>Rosenberg</i>	Amount (\$) <i>325⁰⁰</i>
Purpose of payment (See instructions regarding type of information required.) <i>Donation</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Strunio HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/19/07

5 Payee name

NEEDVILLE HARVEST FEST

6 Payee address; City; State; Zip Code

7 Amount (\$)

200⁰⁰

8 Purpose of payment (See instructions regarding type of information required.)

Donation

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

10/21/07

Payee name

REPUBLICAN PICNIC @ SAFARI TX.

Payee address; City; State; Zip Code

Amount (\$)

350⁰⁰

Purpose of payment (See instructions regarding type of information required.)

Donation

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

10/23/07

Payee name

PAPPA'S GRILL

Payee address; City; State; Zip Code

12000 SW FREEWAY

Houston TX

Amount (\$)

2291.53

~~6150~~ TO 14

Purpose of payment (See instructions regarding type of information required.)

Campaign Event (Food)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

10/27/07

Payee name

GARY JANSON Campaign

Payee address; City; State; Zip Code

Amount (\$)

175⁰⁰

Purpose of payment (See instructions regarding type of information required.)

SPI Position Donation

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held



POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: -

2 FILER NAME

Tom Stano Hgt

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

6

Amount

(\$)

6 Payee address;

City; State; Zip Code

11/17/07

Jams Painting

Sugar Land

800.00

8 Purpose of payment (See instructions regarding type of information required.)

Republican Party Christmas
invitation postage / painting

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)

Payee address;

City; State; Zip Code

11/19/07

US Postal Service

41.00

Purpose of payment (See instructions regarding type of information required.)

Stamps

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)

Payee address;

City; State; Zip Code

11/19

Joan Cain

Sugar Land

1000.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Consulting

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)

Payee address;

City; State; Zip Code

11/29

Greatwood Golf Course

Sugar Land

46.75

Purpose of payment (See instructions regarding type of information required.)

Campaign mtg

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held



POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: -

2 FILER NAME

Tom Staudino Hat

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

12/3/07

MIKE DAVIS SIGNS

6 Payee address; City; State; Zip Code

P.O. Box 103
ROSENBERG TX 77441

994.82

8 Purpose of payment (See instructions regarding type of information required.)

50 Signs

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/3/07

BLUE MOON SIGNS

Payee address; City; State; Zip Code

5901 BLASE
ROSENBERG TX 77471

1219.97

Purpose of payment (See instructions regarding type of information required.)

400 Yard Signs

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/3/07
12/10/07

M. Painting, Graphics and Advertising

Payee address; City; State; Zip Code

3902 East Wisteria
Sugar Land TX 77479

4683.85

Purpose of payment (See instructions regarding type of information required.)

3000 Cook Books

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/4/07

CASA DE ESPERENZA

Payee address; City; State; Zip Code

PO Box 66581
Houston TX 77266

300.00

Purpose of payment (See instructions regarding type of information required.)

Donation

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: .

2 FILER NAME

Tom Stawno HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

12/4/07

Opinion Polling Inc

6 Payee address; City; State; Zip Code

1762.50

8 Purpose of payment (See instructions regarding type of information required.)

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Rolling Service

Date

Payee name

Amount (\$)

12/5/07

Joan Cain

Payee address; City; State; Zip Code

250.00

Sugarland Tx

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/5/07

Republican Party of TBC

Payee address; City; State; Zip Code

c/o Rick Miller

1250.00

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Filing Fee

Date

Payee name

Amount (\$)

12/13/07

Rose/Rich Chamber

Payee address; City; State; Zip Code

ROSENBERG, TX

25.00

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Lunches



POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Tom Stagno HA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

12/13/07

Opinions Unlimited

6 Payee address; City; State; Zip Code

587.50

8 Purpose of payment (See instructions regarding type of information required.)

Polling Service

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/13/07

Joan Cain

Payee address; City; State; Zip Code

SUGARLAND

250.00

Purpose of payment (See instructions regarding type of information required.)

Political Consulting

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/19/07

Winicks Smoke House

Payee address; City; State; Zip Code

EAST BEAUMONT

275.85

Purpose of payment (See instructions regarding type of information required.)

Staff Christmas

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount (\$)

12/21/07

Mike Davis Signs

Payee address; City; State; Zip Code

PO Box 103
Rosenberg TX 77471

57.00

Purpose of payment (See instructions regarding type of information required.)

Additional Signs

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held



POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Tom Staunton</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>12/28/07</i>	5 Payee name <i>M. Dainty's Graphic and Advertising</i>	7 Amount (\$) <i>25</i> <i>108.</i>
6 Payee address; City; State; Zip Code <i>3902 East Wisteria</i> <i>Sugar Land TX 77479</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>500 Business Cards</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>12/28/07</i>	Payee name <i>Campaign Logistics</i>	Amount (\$)
Payee address; City; State; Zip Code <i>2402 Standing Oaks Lane</i> <i>Richmond TX 77469</i>		<i>388.93</i>
Purpose of payment (See instructions regarding type of information required.)		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date <i>10/23/07</i>	Payee name <i>Campaign Logistics</i>	Amount (\$)
Payee address; City; State; Zip Code <i>2401 Standing Oaks Lane</i> <i>Richmond TX 77469</i>		<i>6150.70</i>
Purpose of payment (See instructions regarding type of information required.) <i>Pappa's EVENT COORDINATION</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.)		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

