

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) 043		2 Total pages this report: 1/43	
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Bob			OFFICE USE ONLY Date Received	
	NICKNAME LAST SUFFIX Hebert				
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1303 Foster Creek Drive Richmond TX 77469			Date Hand-delivered or Date Postmarked	
	5 CAMPAIGN TREASURER NAME			Receipt # Amount	
TITLE FIRST MI Pat			Date Processed		
NICKNAME LAST SUFFIX Hebert			Date Imaged		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1303 Foster Creek Richmond TX 77469				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () -				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2007 06/30/2007				
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Other -- Fort Bend County Judge		12 OFFICE SOUGHT (if known)		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	.. 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				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission files)

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 pages

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 235.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 96,600.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 60.00

4. TOTAL POLITICAL EXPENDITURES \$ 75,137.14

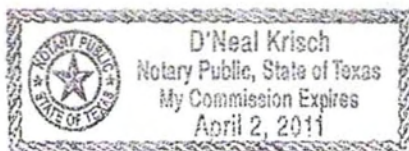
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 72,243.95

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

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.

Bab Helmer
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 9th day of July, 2007, to certify which, witness my hand and seal of office.

D'Neal Krisch
Signature of officer administering oath

D'Neal Krisch
Printed name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 05/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Abraham Abugattas 6 Contributor address; City; State; Zip Code 10834 Lasso Lane Houston TX 77079	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Oscar Aguirre Contributor address; City; State; Zip Code 16358 Ginger Run Way Sugar Land TX 77478	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/07/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code 3200 Southwest Freeway, Suite 2600 Houston TX 77027	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/23/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Andrews & Kurth Texas PAC Contributor address; City; State; Zip Code 600 Travis, suite 4200 Houston TX 77479-5553	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nicholas Aschliman Contributor address; City; State; Zip Code 4129 University Blvd. Houston TX 77005-2713	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:
4/432 FILER NAME
Bob Hebert3 ACCOUNT # (Ethics Commission filers)
0434 Date
02/21/20075 Full name of contributor ☐ out-of-state PAC(ID# _____)
Mike Baldwin7 Amount of
contribution (\$)
1500.008 In-kind contribution
description (if applicable)6 Contributor address; City; State; Zip Code
4311 Sealy Court
Richmond TX 77469

9 Principal occupation (Optional)

10 Employer (Optional)

Date
02/26/2007Full name of contributor ☐ out-of-state PAC(ID# _____)
Peter BarnhartAmount of
contribution (\$)
1500.00In-kind contribution
description (if applicable)Contributor address; City; State; Zip Code
13614 Fawcett Dr.
Houston TX 77069-2454

Principal occupation (Optional)

Employer (Optional)

Date
03/26/2007Full name of contributor ☐ out-of-state PAC(ID# _____)
Bob BassAmount of
contribution (\$)
600.00In-kind contribution
description (if applicable)Contributor address; City; State; Zip Code
1124 Damon
Rosenberg TX 77471

Principal occupation (Optional)

Employer (Optional)

Date
05/02/2007Full name of contributor ☐ out-of-state PAC(ID# _____)
Susan BauhofAmount of
contribution (\$)
100.00In-kind contribution
description (if applicable)Contributor address; City; State; Zip Code
16126 Abberton Hill Drive
Spring TX 77379

Principal occupation (Optional)

Employer (Optional)

Date
02/28/2007Full name of contributor ☐ out-of-state PAC(ID# _____)
Julius BaumannAmount of
contribution (\$)
125.00In-kind contribution
description (if applicable)Contributor address; City; State; Zip Code
162 Bluebonnet
Sugar Land TX 77478

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Berg-Oliver PAC 6 Contributor address; City; State; Zip Code 14701 Saint Marys Ln. Suite 400 Houston TX 77079	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/24/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Charles Bertrand Contributor address; City; State; Zip Code 2111 Summerland Dr. Richmond TX 77469	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Bradley Contributor address; City; State; Zip Code 2902 Highland Laurels Dr. Humble TX 77345	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bob Brown Contributor address; City; State; Zip Code 210 N. Keswick Sugar Land TX 77478	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Retired		Employer (Optional)	
Date 03/29/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bobbie Brown Contributor address; City; State; Zip Code 2522 Plantation Ln. Sugar Land TX 77478	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:

6/43

2 FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

03/07/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)

Tom Brown

6 Contributor address; City; State; Zip Code
40834 Kelley

Hempstead TX 77445

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

03/05/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

CLR/PAC

Contributor address; City; State; Zip Code
7600 W. Tidwell, Suite 400

Houston TX 77040

Amount of
contribution (\$)

1250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

06/30/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Jeff Cannon

Contributor address; City; State; Zip Code
4315 Whickham

Fulshear TX 77441

Amount of
contribution (\$)

2500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

02/28/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Dean Carpenter

Contributor address; City; State; Zip Code
4806 Lantana Court

Sugar Land TX 77479

Amount of
contribution (\$)

125.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

03/26/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Carter & Burgess PAC

Contributor address; City; State; Zip Code
55 Waugh Dr. Suite 800

Houston TX 77007

Amount of
contribution (\$)

1500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:

7/43

2 FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

03/02/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)

Daryl Carter

6 Contributor address; City; State; Zip Code

11501 Ivory Creek
Pearland TX 775847 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

03/07/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Harold Cobb

Contributor address; City; State; Zip Code

12102 Arroyo Verde
Houston TX 77041-5749Amount of
contribution (\$)

750.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

03/02/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Gary Cook

Contributor address; City; State; Zip Code

8101 Desert Jewel Circle
Las Vegas NV 89128Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Developer

Employer (Optional)

Date

03/08/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Stephen Costello

Contributor address; City; State; Zip Code

2211 McDuffie
Houston TX 77019Amount of
contribution (\$)

2500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Engineer

Employer (Optional)

Date

02/28/2007

Full name of contributor ☐ out-of-state PAC(ID# _____)

Kay Crouch

Contributor address; City; State; Zip Code

402 Teetshorn
Houston TX 77009Amount of
contribution (\$)

125.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 8/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission files) 043	
4 Date 03/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ernie Croucher	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code TX			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Edward Cummins	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5005 RiverWay Suite 310 Houston TX 77056			
Principal occupation (Optional)		Employer (Optional)	
Date 04/23/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Dannenbaum	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3100 w. Alabama Houston TX 77098			
Principal occupation (Optional)		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert Deforest	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7519 Stone Arbor Dr. Sugar Land TX 77479			
Principal occupation (Optional) Landscape Architect		Employer (Optional)	
Date 03/21/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Eastwood	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 Victoria Drive Houston TX 77022			
Principal occupation (Optional) Engineer		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 9/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/07/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Truman Edminister, III 6 Contributor address; City; State; Zip Code 1126 Banks St. Houston TX 77006	7 Amount of contribution (\$) 1250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William Fendley Contributor address; City; State; Zip Code 29442 Hegar Road Hockley TX 77447	Amount of contribution (\$) 1250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Richard Fields Contributor address; City; State; Zip Code 4800 Sugar Grove, #625 Stafford TX 77477	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Engineer		Employer (Optional)	
Date 03/15/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Freeze and Nichols PAC Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth TX 76109	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/24/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mrs. O.D. Gaither Contributor address; City; State; Zip Code 2 W. Kitty Hawk St. Richmond TX 77469-9710	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 10/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 02/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Roger Galatas 6 Contributor address; City; State; Zip Code P.O. Box 131598 The Woodlands TX 77393	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/23/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dick Gay Contributor address; City; State; Zip Code 3903 Turn Berry Dr. Sugar Land TX 77479	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Engineer		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kerry Gilbert Contributor address; City; State; Zip Code 20414 Chadbury Park Drive Katy TX 77450	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/29/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William Hall Contributor address; City; State; Zip Code 2386 Calypso Lane League City TX 77573	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/19/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Susan Hargather Contributor address; City; State; Zip Code 3315 Falling Brook Ct. Sugar Land TX 77479	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Printer		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 11/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 01/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pat Hebert 6 Contributor address; City; State; Zip Code 1303 Foster Creek Richmond TX 77469	7 Amount of contribution (\$) 6200.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/12/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Heinemann Contributor address; City; State; Zip Code 3411 Creekstone Dr. Sugar Land TX 77479	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chuck Hewell Contributor address; City; State; Zip Code 3126 E. Hickory Park Circle Sugar Land TX 77479	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Hoelker Contributor address; City; State; Zip Code 3135 Hickory Park Circle Sugar Land TX 77479	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) D. M. Horsley Contributor address; City; State; Zip Code 1106 Morton League Richmond TX 77469	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 12/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 02/28/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kim Icenhower 6 Contributor address; City; State; Zip Code 3019 Arrowhead Dr. Sugar Land TX 88479	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/29/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bill Jameson Contributor address; City; State; Zip Code 803 San Marino Sugar Land TX 77478	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Financial Planner		Employer (Optional)	
Date 03/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert Jefferies Contributor address; City; State; Zip Code 15015 Pebble Bend Houston TX 77068	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Johnson Contributor address; City; State; Zip Code 46 Still Forest Drive Houston TX 77024	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/24/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patricia Joiner Contributor address; City; State; Zip Code 8588 Katy Freeway, Suite 441 Houston TX 77024-1820	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 13/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/07/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bobby Jones 6 Contributor address; City; State; Zip Code 3101 Huntington Ct. Katy TX 77493	7 Amount of contribution (\$) 2500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brenda Kennerly Contributor address; City; State; Zip Code P.O. Box 1129 Richmond TX 77406-1129	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Douglas Konopka Contributor address; City; State; Zip Code 1736 Milford Houston TX 77098	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Calvin Ladner Contributor address; City; State; Zip Code 1720 Libby Houston TX 77018	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Engineer		Employer (Optional)	
Date 04/11/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bob Leared Contributor address; City; State; Zip Code 9430 Benning Houston TX 77031	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Tax Consultant		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 14/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ben Lednicky 6 Contributor address; City; State; Zip Code P. O. Box 770217 Houston TX 77215	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) Landscape Architect		10 Employer (Optional)	
Date 02/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CC Lee Contributor address; City; State; Zip Code 6213 Skyline Houston TX 77057	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Joe Lee Contributor address; City; State; Zip Code 720 Glenover Dr. Alpharetta GA 30004	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Letsos Contributor address; City; State; Zip Code P.O. Box 36927 Houston TX 77236	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linebarger Goggan Blair & Sampson,LLP Contributor address; City; State; Zip Code P.O. Box 17428 Austin TX 78760	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 15/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/10/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William Linthicum 6 Contributor address; City; State; Zip Code 22622 Arbor Stream Dr. Katy TX 77450	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mark Magee Contributor address; City; State; Zip Code 5706 Garden Hills Dr. Sugar Land TX 77479	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/07/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dr. Joe Mandola Contributor address; City; State; Zip Code 502 Hwy (A) Richmond TX 77469	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Joel Marshall Contributor address; City; State; Zip Code P.O. Box 584 Barker TX 77413-0584	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/29/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) F. H. Marsters Contributor address; City; State; Zip Code 1306 FM 1092 Missouri City TX 77459	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.				1 Total pages this report: 16/43	
2 FILER NAME Bob Hebert				3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Peyton Martin		7 Amount of contribution (\$) 1500.00	8 In-kind contribution description (if applicable)	
	6 Contributor address; City; State; Zip Code 310 Morton St. #280 Richmond TX 77469				
9 Principal occupation (Optional)			10 Employer (Optional)		
Date 04/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) J. J. Martinez		Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code 4511 Ave. H Rosenberg TX 77471				
Principal occupation (Optional)			Employer (Optional)		
Date 02/23/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kevin Matocha		Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code 1614 Pecan Crossing Richmond TX 77469				
Principal occupation (Optional)			Employer (Optional)		
Date 03/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Karen McCarter		Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code 5418 Cherry Ridge Rd. Richmond TX 77469				
Principal occupation (Optional) Housewife			Employer (Optional)		
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert McDermott		Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)	
	Contributor address; City; State; Zip Code 6911 Hickory Creek Lane Dallas TX 75252				
Principal occupation (Optional)			Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 17/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/29/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Andre McDonald 6 Contributor address; City; State; Zip Code P.O. Box 16819 Sugar Land TX 77496-6819	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Charles McDonald Contributor address; City; State; Zip Code P.O. Box 346 Richmond TX 77406-0346	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mary Ann McDonald Contributor address; City; State; Zip Code 1619 Long Dr. Richmond TX 77469	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lonnie Meadows Contributor address; City; State; Zip Code 205 Hillcrest Richmond TX 77469	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Baker PAC Contributor address; City; State; Zip Code 100 Airside Drive Moon Township PA 15108	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 18/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/29/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jack Miller 6 Contributor address; City; State; Zip Code 13703 Barryknoll Houston TX 77079	7 Amount of contribution (\$) 2500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) Engineer		10 Employer (Optional)	
Date 03/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Miller Contributor address; City; State; Zip Code 3193 Fannin Lane Southlake TX 78092	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/22/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hilmar Moore Contributor address; City; State; Zip Code 900 Hillcrest Richmond TX 77469-4319	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Leisa Nelson Contributor address; City; State; Zip Code 312 Breezeway Bend Land League City TX 77573	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ted Nelson Contributor address; City; State; Zip Code 74 Lazy Lane The Woodlands TX 77380	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 19/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 02/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shayne Newell 6 Contributor address; City; State; Zip Code 5022 Cedar Spring Dr. Missouri City TX 77459	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/22/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Les Newton Contributor address; City; State; Zip Code 3506 Mesquite Dr. Sugar Land TX 77479	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/12/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tim Newton Contributor address; City; State; Zip Code 4436 Holt St. Bellaire TX 77401	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Null Contributor address; City; State; Zip Code 3150 Robinson Road Missouri City TX 77459	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mike Orsak Contributor address; City; State; Zip Code 301 s. 9th St. Suite 210 Richmond TX 77469	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 20/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/10/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perdue, Brandon, Fielder, Collins, & Mott LLP 6 Contributor address; City; State; Zip Code 1235 North Loop w. Suite 600 Houston TX 77008	7 Amount of contribution (\$) 375.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bob Perry Contributor address; City; State; Zip Code P. O. Box 34153 Houston TX 77234	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Home Builder		Employer (Optional)	
Date 02/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donald Poarch Contributor address; City; State; Zip Code 2 Hedwig Court Houston TX 77024	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/29/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tom Ramsey Contributor address; City; State; Zip Code 1410 Mustang Richmond TX 77469	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Engineer		Employer (Optional)	
Date 03/24/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mark Rose Contributor address; City; State; Zip Code 525 Rosedale St. Highland Village TX 75077	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The **INSTRUCTION GUIDE** explains how to complete this form.

1 Total pages this report:
21/43

2 FILER NAME
Bob Hebert

3 ACCOUNT # (Ethics Commission filers)
043

4 Date

03/28/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Jeff Ross

6 Contributor address; City; State; Zip Code
1821 Sunset Blvd
Houston TX 77005

7 Amount of contribution (\$)

2500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)
Engineers

10 Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)
David Rowe

03/16/2007

Contributor address; City; State; Zip Code
4550 Warwick Dr.
Sugar Land TX 77479

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)
Maury Rubin

03/01/2007

Contributor address; City; State; Zip Code
4132 Meyerwood
Houston TX 77025

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)
James Russ

03/07/2007

Contributor address; City; State; Zip Code
6155 Meadowlake Ln
Houston TX 77057

Amount of contribution (\$)

1250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)
Don Russell

02/26/2007

Contributor address; City; State; Zip Code
2106 Country Club
Sugar Land TX 77478

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation (Optional)
Retired

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 22/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/26/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mike Scherer 6 Contributor address; City; State; Zip Code 304 Jackson Richmond TX 77469	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) 0		10 Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Schwartz,Page & Harding,LLP Contributor address; City; State; Zip Code 1300 Post Oak Blvd. Suite 1400 Houston TX 77056	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shelley Sekula-Gibbs Contributor address; City; State; Zip Code 1411 Pecan Crossing Dr. Richmond TX 77469	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/21/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shelley Selula-Gibbs Contributor address; City; State; Zip Code 17300 El Camino Real Suite 103 Houston TX 77058	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sunil Sharma Contributor address; City; State; Zip Code 510 Longview Sugar Land TX 77478-3727	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 23/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jim Shaw 6 Contributor address; City; State; Zip Code 2707 Bristol Ct. Sugar Land TX 77478	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/13/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David Showalter Contributor address; City; State; Zip Code 3928 Paseo Royale Blvd Richmond TX 77469	Amount of contribution (\$) 1500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Smith Contributor address; City; State; Zip Code 2919 Payton Springs Dr. Manvel TX 77578	Amount of contribution (\$) 1250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Staudt Contributor address; City; State; Zip Code 2627 N. Loop West Houston TX 77008	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/05/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Carl Stephens Contributor address; City; State; Zip Code 46 Ambleside Crescent Sugar Land TX 77479	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Developer		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 24/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/29/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jon Strange 6 Contributor address; City; State; Zip Code 24823 Lakebriar Katy TX 77494-1808	7 Amount of contribution (\$) 1500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional) Engineer		10 Employer (Optional)	
Date 02/23/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jim Sturgeon Contributor address; City; State; Zip Code 3814 Snead Court Sugar Land TX 77479	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Joe Swinbank Contributor address; City; State; Zip Code P. O. Box 19129 Houston TX 77224	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/16/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) TSC Fund Contributor address; City; State; Zip Code 6250 Westpark Dr. Suite 200 Houston TX 77057	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/30/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Turner, Collie & Braden PAC Contributor address; City; State; Zip Code P. O. Box 130089 Houston TX 77219	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 25/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/24/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Llarance Turner 6 Contributor address; City; State; Zip Code P.O. Box 487 Stafford TX 77497	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 05/21/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Van De Weile Contributor address; City; State; Zip Code 1715 Mossy Stone Houston TX 77077	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/27/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Allison Wen Contributor address; City; State; Zip Code 11627 FM 1464 Richmond TX 77469	Amount of contribution (\$) 3465.00	In-kind contribution description (if applicable) Underwriting of breakfa - st
Principal occupation (Optional)		Employer (Optional)	
Date 03/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tom Wilcox Contributor address; City; State; Zip Code 4603 Water Point Missouri City TX 77459	Amount of contribution (\$) 1250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/24/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Daniel Wong Contributor address; City; State; Zip Code 4506 Colony Glen Ct. Sugar Land TX 77479	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional) Engineer		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 26/43	
2 FILER NAME Bob Hebert		3 ACCOUNT # (Ethics Commission filers) 043	
4 Date 03/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bill Zemanek 6 Contributor address; City; State; Zip Code 1714 Mayweather Lane Richmond TX 77469	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/13/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Melvin spinks Contributor address; City; State; Zip Code 16539 Obsidian Houston TX 77095	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
27/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
06/07/2007**5** Payee name
Affairs with Flair**7** Amount
(\$)
265.21**6** Payee address; City; State; Zip Code
720 Riveredge Dr.
Richmond TX 77469**8** Purpose of expenditure (See instructions regarding type of information required.)
Refreshments for Senator Cornyn reception**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/02/2007Payee name
American Heart AssociationAmount
(\$)
100.00Payee address; City; State; Zip Code
P.O. Box 20448
Houston TX 77225Purpose of expenditure (See instructions regarding type of information required.)
DonationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/16/2007Payee name
American Red CrossAmount
(\$)
5200.00Payee address; City; State; Zip Code
P. O. Box 393
Richmond TX 77406-0393Purpose of expenditure (See instructions regarding type of information required.)
Donation at Super BallComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/10/2007Payee name
Asians against Domestic AbuseAmount
(\$)
500.00Payee address; City; State; Zip Code
P.O. Box 420776
Houston TX 77242-0776Purpose of expenditure (See instructions regarding type of information required.)
Gala SponsorshipComplete 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 report:
28/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
03/27/2007**5** Payee name
Avtec Systems**7** Amount
(\$)
750.00**6** Payee address; City; State; Zip CodeP.O. Box 35231
Houston TX 77235**8** Purpose of expenditure (See instructions regarding type of information required.)
Audio visual and Sound system rental for Fundraising Breakfast**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/13/2007Payee name
Boy Scouts of AmericaAmount
(\$)
2400.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
DonationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/07/2007Payee name
Boy Scouts of AmericaAmount
(\$)
1500.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
DonationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/02/2007Payee name
Child Advocates of Fort Bend CountyAmount
(\$)
1500.00

Payee address; City; State; Zip Code

P.O. Box 1032

Richmond TX 77469

Purpose of expenditure (See instructions regarding type of information required.)
Gala sponsorshipComplete 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 report:
29/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
04/15/2007**5** Payee name
Child Advocates of Fort Bend County**7** Amount
(\$)
5000.00**6** Payee address; City; State; Zip Code
P.O. Box 1032
Richmond TX 77469**8** Purpose of expenditure (See instructions regarding type of information required.)
Grand Opening Sponsorship**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held**Date**
01/22/2007**Payee name**
Cinco Ranch Ladies Club**Amount**
(\$)
250.00**Payee address; City; State; Zip Code**
Katy TX 77450**Purpose of expenditure (See instructions regarding type of information required.)**
Gala Sponsorship**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
05/18/2007**Payee name**
City of Rosenberg**Amount**
(\$)
250.00**Payee address; City; State; Zip Code**
2110 Fourth St.
Rosenberg TX 77471**Purpose of expenditure (See instructions regarding type of information required.)**
4th of July Celebration**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
05/02/2007**Payee name**
Don Dulin**Amount**
(\$)
292.28**Payee address; City; State; Zip Code**
P.O. Box 1840
Richmond TX 77406**Purpose of expenditure (See instructions regarding type of information required.)**
Web site hosting**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 report:
30/43**2** FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

05/16/2007

5 Payee name

Don Dulin

7

Amount

(\$)

32.48

6 Payee address; City; State; Zip Code

P.O. Box 1840

Richmond TX 77406

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

Domain Name annual fee

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

Candidate / Officeholder name

Office sought

Office held

Date

05/28/2007

Payee name

Don Dulin

Amount

(\$)

135.31

Payee address; City; State; Zip Code

P.O. Box 1840

Richmond TX 77406

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

Website updates

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/02/2007

Payee name

Exchange Club of Fort Bend

Amount

(\$)

300.00

Payee address; City; State; Zip Code

P.O. Box 169

Sugar Land TX 77487-1069

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

Donation

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/23/2007

Payee name

Exchange Club of Sugar Land

Amount

(\$)

2500.00

Payee address; City; State; Zip Code

4800 Sugar Grove Blvd. Suite 100

Stafford TX 77477-2627

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

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 report:
31/43**2** FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

02/23/2007

5 Payee name

Exchange Club of Sugar Land

7

Amount

(\$)

1000.00

6 Payee address; City; State; Zip Code

4800 Sugar Grove Blvd. Suite 100

Stafford TX 77477-2627

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

Spaghetti Cook-off sponsorship

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

Candidate / Officeholder name

Office sought

Office held

Date

02/14/2007

Payee name

Fort Bend Boys Choir

Amount

(\$)

500.00

Payee address; City; State; Zip Code

4411 Bluebonnet

Stafford TX 77477

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

Gala Sponsorship

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/03/2007

Payee name

Fort Bend Boys Choir

Amount

(\$)

4000.00

Payee address; City; State; Zip Code

4411 Bluebonnet

Stafford TX 77477

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

Donation

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/07/2007

Payee name

Fort Bend Cares Foundation

Amount

(\$)

100.00

Payee address; City; State; Zip Code

14823 Southwest Freeway

Sugar Land TX 77478

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

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 report:
32/43**2** FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

01/14/2007

5 Payee name

Fort Bend Co. Republican PAC

7

Amount

(\$)

1500.00

6 Payee address; City; State; Zip Code

310 Morton St. Suite 126

Richmond TX 77469

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

Lincoln Dinner sponsorship

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

Candidate / Officeholder name

Office sought

Office held

Date

02/27/2007

Payee name

Fort Bend Co. Republican PAC

Amount

(\$)

7000.00

Payee address; City; State; Zip Code

310 Morton St. Suite 126

Richmond TX 77469

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

Donation

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/07/2007

Payee name

Fort Bend County Fair Association

Amount

(\$)

1500.00

Payee address; City; State; Zip Code

4310 Hwy 36 South

Rosenberg TX 77471

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

Fair Sponsorship

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/02/2007

Payee name

Fort Bend Economic Development Council

Amount

(\$)

5000.00

Payee address; City; State; Zip Code

One Fluor Danial Place

Sugar Land TX 77478

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

Fort Bend Co. Legislative Conference Sponsorship- D - inner sponsorship

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 report:
33/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043

4 Date 01/14/2007	5 Payee name Fort Bend Junior Service League 6 Payee address; City; State; Zip Code 1270 Crabb River Road, Suite 600 Richmond TX 77469	7 Amount (\$) 500.00
8 Purpose of expenditure (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 03/12/2007	Payee name Fort Bend Museum Association Payee address; City; State; Zip Code P.O. Drawer 460 Richmond TX 77469	Amount (\$) 1500.00
Purpose of expenditure (See instructions regarding type of information required.) Lone Star Stomp Sponsorship		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/19/2007	Payee name Fort Bend Museum Association Payee address; City; State; Zip Code P.O. Drawer 460 Richmond TX 77469	Amount (\$) 325.00
Purpose of expenditure (See instructions regarding type of information required.) Stomp Tickets		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/07/2007	Payee name Fort Bend Museum Association Payee address; City; State; Zip Code P.O. Drawer 460 Richmond TX 77469	Amount (\$) 3325.00
Purpose of expenditure (See instructions regarding type of information required.) 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 report:
34/43**2 FILER NAME**

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

04/19/2007

5 Payee name

Fort Bend Republican Woman's Club

7 Amount

(\$)

60.00

6 Payee address; City; State; Zip Code

5111Cambridge

Sugar Land TX 77479

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

Tickets to Luncheon- Donation

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

Candidate / Officeholder name

Office sought

Office held

Date

03/07/2007

Payee name

Fort Bend Salutes America

Amount

(\$)

500.00

Payee address; City; State; Zip Code

1126 Cambrian Park Ct.

Sugar Land TX 77479

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

Sponsorship

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/11/2007

Payee name

Fort Bend Senior Citizens

Amount

(\$)

300.00

Payee address; City; State; Zip Code

1333 Band Rd

Rosenberg TX 77471

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

Golf Tournament hole sponships

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/27/2007

Payee name

Francis Smith

Amount

(\$)

100.00

Payee address; City; State; Zip Code

P.O. Box 183

Beasley TX 77417

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

Benefit for Francis Smith

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 report:
35/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
06/07/2007**5** Payee name
Houston Community Newspaper**7** Amount
(\$)
250.00**6** Payee address; City; State; Zip Code
523 N. Sam Houston Parkway, Suite 600
Houston TX 77060**8** Purpose of expenditure (See instructions regarding type of information required.)
Class of 2007 Graduation Ad**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held**Date**
05/16/2007**Payee name**
Impact Player Partners**Amount**
(\$)
5000.00**Payee address; City; State; Zip Code**
8044 Montgomery Rd
Cincinnati OH 45236**Purpose of expenditure** (See instructions regarding type of information required.)
Sponsorship for gala**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
02/02/2007**Payee name**
Italian Maid**Amount**
(\$)
32.01**Payee address; City; State; Zip Code**
300 Morton
Richmond TX 77469**Purpose of expenditure** (See instructions regarding type of information required.)
Commissioners lunch**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
02/13/2007**Payee name**
Italian Maid**Amount**
(\$)
32.01**Payee address; City; State; Zip Code**
300 Morton
Richmond TX 77469**Purpose of expenditure** (See instructions regarding type of information required.)
Commissioner luncy**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 report:
36/43**2** FILER NAME

Bob Hebert

3 ACCOUNT # (Ethics Commission filers)

043

4 Date

04/03/2007

5 Payee name

Literacy Council of Fort Bend County

7

Amount

(\$)

250.00

6 Payee address; City; State; Zip Code

12530 Emily Court

Sugar Land TX 77478

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

Sponsorship

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

Candidate / Officeholder name

Office sought

Office held

Date

06/07/2007

Payee name

Literacy Council of Fort Bend County

Amount

(\$)

2600.00

Payee address; City; State; Zip Code

12530 Emily Court

Sugar Land TX 77478

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

Donation

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/09/2007

Payee name

MPrinting Graphics and Advertising

Amount

(\$)

1510.09

Payee address; City; State; Zip Code

3902 E. Wisteria Cir.

Sugar Land TX 77479

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

Invitations, reply cards for annual fundraiser

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/15/2007

Payee name

Patsey McKnight

Amount

(\$)

400.00

Payee address; City; State; Zip Code

2734 Sicklepod

Houston TX 77084

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

Preparation of fundraising invitations

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 report:
37/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043

4 Date 03/12/2007	5 Payee name Mental Health Association of Fort Bend County	7 Amount (\$) 200.00
	6 Payee address; City; State; Zip Code 10435 Greenbrough Dr.Bldg. II,Suite 200 Stafford TX 77477	

8 Purpose of expenditure (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 02/16/2007	Payee name Needville Youth Fair	Amount (\$) 500.00
	Payee address; City; State; Zip Code P.O. Box 237 Needville TX 77461	

Purpose of expenditure (See instructions regarding type of information required.) Sponsorship Youth Fair	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

Date 05/18/2007	Payee name Needville Youth Fair	Amount (\$) 2915.00
	Payee address; City; State; Zip Code P.O. Box 237 Needville TX 77461	

Purpose of expenditure (See instructions regarding type of information required.) Donation - add-ons to Youth Fair	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

Date 02/12/2007	Payee name Office Depot	Amount (\$) 350.00
	Payee address; City; State; Zip Code 5400 FM 1640,Suite 100 Richmond TX 77469	

Purpose of expenditure (See instructions regarding type of information required.) Printing for Greater Houston Council of Federated R - epublican Women workshop	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 report:
38/432 FILER NAME
Bob Hebert3 ACCOUNT # (Ethics Commission filers)
0434 Date
03/04/20075 Payee name
Office Depot7 Amount
(\$)
186.196 Payee address; City; State; Zip Code
5400 FM 1640,Suite 100
Richmond TX 774698 Purpose of expenditure (See instructions regarding type of
information required.)
Ink for Greater Houston Council and Fort Bend Repu -
blican women copies9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/24/2007Payee name
Office DepotAmount
(\$)
194.54Payee address; City; State; Zip Code
5400 FM 1640,Suite 100
Richmond TX 77469Purpose of expenditure (See instructions regarding type of
information required.)
Supplies for breakfast; name tags,markers,board,inkComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/25/2007Payee name
Office DepotAmount
(\$)
95.48Payee address; City; State; Zip Code
5400 FM 1640,Suite 100
Richmond TX 77469Purpose of expenditure (See instructions regarding type of
information required.)
Program printingComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/26/2007Payee name
Office DepotAmount
(\$)
30.30Payee address; City; State; Zip Code
5400 FM 1640,Suite 100
Richmond TX 77469Purpose of expenditure (See instructions regarding type of
information required.)
Supplies for BreakfastComplete 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 report:
39/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043

4 Date 02/10/2007	5 Payee name Oyster Creek Rotary Club 6 Payee address; City; State; Zip Code P.O. Box 1056 Missouri City TX 77459	7 Amount (\$) 500.00
8 Purpose of expenditure (See instructions regarding type of information required.) 2007 Crawfish Festival Sponsorship		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/28/2007	Payee name Pappas Grill Payee address; City; State; Zip Code Meadows Place TX	Amount (\$) 82.91
Purpose of expenditure (See instructions regarding type of information required.) Staff Luncheon		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/19/2007	Payee name Pappas Grill Payee address; City; State; Zip Code Meadows Place TX	Amount (\$) 281.83
Purpose of expenditure (See instructions regarding type of information required.) Mayor's luncheon		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/26/2007	Payee name Perry's Steakhouse and Grille Payee address; City; State; Zip Code 2115 Town Square Sugar Land TX 77478	Amount (\$) 250.00
Purpose of expenditure (See instructions regarding type of information required.) Door Prize gift certificates for fundraising breakfast		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 report:
40/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
05/03/2007**5** Payee name
PortraitPros**7** Amount
(\$)
216.50**6** Payee address; City; State; Zip Code
1105 Merlene Dr.
Austin TX 78732**8** Purpose of expenditure (See instructions regarding type of information required.)
Campaign pictures**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/02/2007Payee name
Rainbow RoomAmount
(\$)
100.00Payee address; City; State; Zip Code
3350-A Hwy 6
Sugar Land TX 77478Purpose of expenditure (See instructions regarding type of information required.)
DonationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/07/2007Payee name
Republican Party of Fort Bend CountyAmount
(\$)
380.00Payee address; City; State; Zip Code
231 River Grove
Sugar Land TX 77478Purpose of expenditure (See instructions regarding type of information required.)
4 tickets to Lincoln DinnerComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/10/2007Payee name
Richmond Rotary ClubAmount
(\$)
500.00Payee address; City; State; Zip Code
310 Morton Street, PMB 176
Richmond TX 77469Purpose of expenditure (See instructions regarding type of information required.)
Fish Fry SponsorshipComplete 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 report:
41/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
02/13/2007**5** Payee name
Rosenberg Lions Club**7** Amount
(\$)
140.00**6** Payee address; City; State; Zip Code

Rosenberg TX 77471

8 Purpose of expenditure (See instructions regarding type of information required.)
Donation**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/16/2007Payee name
Rosenberg Lions ClubAmount
(\$)
100.00

Payee address; City; State; Zip Code

Rosenberg TX 77471

Purpose of expenditure (See instructions regarding type of information required.)
Golf Tournament donationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
02/10/2007Payee name
Rosenberg Railroad MuseumAmount
(\$)
100.00

Payee address; City; State; Zip Code

3rd and Ave F

Rosenberg TX 77471

Purpose of expenditure (See instructions regarding type of information required.)
Fundraiser sponsorshipComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/23/2007Payee name
Royal Dukes Social and Charity clubAmount
(\$)
60.00

Payee address; City; State; Zip Code

P.O. Box 503
Sugar Land TX 77479Purpose of expenditure (See instructions regarding type of information required.)
Hole Sponsorship for golf tournamentComplete 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 report:
42/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043**4** Date
03/12/2007**5** Payee name

Second Mile

7 Amount
(\$)
150.00**6** Payee address; City; State; Zip Code

504 FM 1092, Suite I

Stafford TX 77477

8 Purpose of expenditure (See instructions regarding type of information required.)
Donation**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/28/2007

Payee name

Edward Shack

Amount
(\$)
1950.00

Payee address; City; State; Zip Code

814 San Jacinto Blvd. Suite 202

Austin TX 78701

Purpose of expenditure (See instructions regarding type of information required.)
ConsultationComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
04/03/2007

Payee name

Sugar Land Masonic Lodge

Amount
(\$)
250.00

Payee address; City; State; Zip Code

P. O. Box 1133

Sugar Land TX 77487-1133

Purpose of expenditure (See instructions regarding type of information required.)
ContributionComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/28/2007

Payee name

Sugar Land Rotary Club

Amount
(\$)
500.00

Payee address; City; State; Zip Code

P.O. Box 16549

Sugar Land TX 77496

Purpose of expenditure (See instructions regarding type of information required.)
Shrimp Fest SponsorshipComplete 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 report:
43/43**2** FILER NAME
Bob Hebert**3** ACCOUNT # (Ethics Commission filers)
043

4 Date 03/12/2007	5 Payee name T W Davis YMCA 6 Payee address; City; State; Zip Code 911 Thompsons Hwy Richmond TX 77469	7 Amount (\$) 100.00
8 Purpose of expenditure (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 02/09/2007	Payee name United States Postal Service Payee address; City; State; Zip Code 5560 FM 1640 Richmond TX 77469	Amount (\$) 1560.00
Purpose of expenditure (See instructions regarding type of information required.) Stamps for annual fundraiser		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/28/2007	Payee name University of Houston Payee address; City; State; Zip Code 3100 Cullen Blvd. Houston TX 77204-6002	Amount (\$) 5000.00
Purpose of expenditure (See instructions regarding type of information required.) Cougar Pride Membership - Donation		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/11/2007	Payee name Milton Wright Payee address; City; State; Zip Code 2402 Standing Oak Lane Richmond TX 77469	Amount (\$) 125.00
Purpose of expenditure (See instructions regarding type of information required.) Golf Tournament hole sponsorship		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held