

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: <span style="font-size: 2em; font-weight: bold;">9</span>									
3 COMMITTEE NAME  <div style="font-size: 1.5em; font-weight: bold; text-align: center;">TWO-PENNY PAC</div>		<b>OFFICE USE ONLY</b>										
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:    APT / SUITE #:    CITY:    STATE:    ZIP CODE  <div style="font-size: 1.2em;">3506 NORMANDY RIDGE AUSTIN, TX 78738</div>		Date Received   Date Hand-delivered or Date Postmarked									
5 CAMPAIGN TREASURER NAME	MS / MRS / MR <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">MR</span> FIRST    MI  <div style="font-size: 1.2em;">ROBERT    T</div> NICKNAME    LAST    SUFFIX  <div style="font-size: 1.2em;">SALGO</div>	Receipt #    Amount	Date Processed  Date Imaged									
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):    APT / SUITE #:    CITY:    STATE:    ZIP CODE  <div style="font-size: 1.2em;">3506 NORMANDY RIDGE AUSTIN, TX 78738</div>											
7 CAMPAIGN TREASURER'S MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX:    APT / SUITE #:    CITY:    STATE:    ZIP CODE  <div style="font-size: 1.2em;">3506 NORMANDY RIDGE AUSTIN, TX 78738</div>											
8 CAMPAIGN TREASURER PHONE	AREA CODE    PHONE NUMBER    EXTENSION  <div style="font-size: 1.2em;">(512) 748-4916</div>											
9 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Dissolution (attach PAC-DR)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 10th day after campaign treasurer termination</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (attach PAC-DR)		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 limit										
<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (attach PAC-DR)										
	<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination										
10 PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month    Day    Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month    Day    Year</td> </tr> <tr> <td style="text-align: center; font-size: 1.2em;">9 / 25 / 2009</td> <td></td> <td style="text-align: center; font-size: 1.2em;">10 / 24 / 2009</td> </tr> </table>			Month    Day    Year	THROUGH	Month    Day    Year	9 / 25 / 2009		10 / 24 / 2009			
Month    Day    Year	THROUGH	Month    Day    Year										
9 / 25 / 2009		10 / 24 / 2009										
11 ELECTION	ELECTION DATE Month    Day    Year  <div style="font-size: 1.2em;">11 / 3 / 09</div>	ELECTION TYPE  <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special										

GO TO PAGE 2

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**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

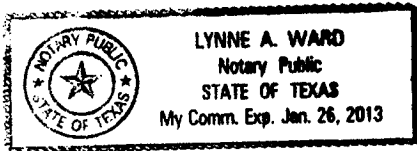
**FORM SPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> <p style="text-align:center"><i>TWO-PENNY PAC</i></p>	<b>ACCOUNT #</b> (Ethics Commission filers)
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<b>13 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)	<input type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICEHOLDER	<b>CANDIDATE / OFFICEHOLDER NAME</b>  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>
<input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)	<input type="checkbox"/> MEASURE	<b>BALLOT IDENTIFICATION / #</b> <b>ELECTION DATE</b> <i>LTISD TAX RATIFICATION</i> / Month      Day      Year <i>ROLLBACK ELECTION</i> 11 /      3 /      2009
<input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)		<b>DESCRIPTION</b> <i>Support LTISD's request for \$0.02/\$100 valuation tax increase</i>
<input type="checkbox"/> <b>ASSIST</b> (Officeholder)		

<b>14 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS ( <i>Sch A &amp; C</i> ) (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>2,160.00</i>
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES ( <i>Sch F</i> )	\$ <i>1,282.48</i>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>1,418.16</i>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>—</i>

**15 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.

*Salgo*

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robert Salgo, this the 26 day of October, 2009, to certify which, witness my hand and seal of office.

*Lynne A. Ward*  
Signature of officer administering oath

*Lynne A. Ward*  
Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

1/4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>4</b>	
2 FILER NAME <b>TWO-PENNY PAC</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>9/30/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Linnea Bennett</b>	7 Amount of contribution (\$) <b>\$100.00</b>	8 In-kind contribution description (if applicable) <b>n/a</b>
6 Contributor address; City; State; Zip Code <b>2902 Brittany Point Ln. AUSTIN, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>9/30/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Charles &amp; Patricia Edwards</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>n/a</b>
Contributor address; City; State; Zip Code <b>1205 Lakeway Dr. Lakeway, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>9/30/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alan &amp; Ina Williams</b>	Amount of contribution (\$) <b>\$150.00</b>	In-kind contribution description (if applicable) <b>n/a</b>
Contributor address; City; State; Zip Code <b>3801 Serene Hills Dr. AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/2/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Taylor &amp; Pamela Fyfe</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>n/a</b>
Contributor address; City; State; Zip Code <b>14 Chameleon Ct. The Hills, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/2/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve &amp; Kristin Harvey</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>n/a</b>
Contributor address; City; State; Zip Code <b>1608 Lakeway Blvd. AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		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**

2/4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>4</b>	
2 FILER NAME <b>TWO-PENNY PAC</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>10/2/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael R. &amp; Megan Mosley</b> 6 Contributor address; City; State; Zip Code <b>140 Acapulco Dr. Lakeway, TX 78734</b>	7 Amount of contribution (\$) <b>\$20.00</b>	8 In-kind contribution description (if applicable) <b>N/A</b>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10/2/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patrick L. &amp; Misty S. Watkins</b> Contributor address; City; State; Zip Code <b>P.O. Box 9662 AUSTIN, TX 78766</b>	Amount of contribution (\$) <b>\$50.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/2/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Matthew &amp; April Womack</b> Contributor address; City; State; Zip Code <b>126 Carefree Circle AUSTIN, TX 78734</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/6/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jason &amp; Angela Budin</b> Contributor address; City; State; Zip Code <b>4308 Travis Vista Dr. AUSTIN, TX 78738</b>	Amount of contribution (\$) <b>\$200.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/8/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ann V. Bradnax</b> Contributor address; City; State; Zip Code <b>204 Dasher Dr. AUSTIN, TX 78734</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**  
**3/4**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>4</b>	
2 FILER NAME <b>TWO - PENNY PAC</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>10/8/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve Taylor &amp; Amy Zepp Still</b>	7 Amount of contribution (\$) <b>\$50.00</b>	8 In-kind contribution description (if applicable) <b>N/A</b>
6 Contributor address; City; State; Zip Code <b>2900 Brittany Point Ln. AUSTIN, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10/14/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Todd Owen &amp; Glenda J. Satterfield</b>	Amount of contribution (\$) <b>\$25.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>16903 Upper Woods Cove AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/14/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>J.R. &amp; Susan Tolles</b>	Amount of contribution (\$) <b>\$200.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>13505 Byrds Nest Dr. AUSTIN, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/15/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Roger Cooper &amp; Lisa F. Lawrence</b>	Amount of contribution (\$) <b>\$75.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>304 Cedar Hurst Lane AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/19/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JOSH &amp; LAURA WILES</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>12 Autumn Oak The Hills, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**  
4/4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>4</b>	
2 FILER NAME <b>TWO-PENNY PAC</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>10/19/09</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Thomas &amp; Jennifer Wright</b>	7 Amount of contribution (\$) <b>\$50.00</b>	8 In-kind contribution description (if applicable) <b>N/A</b>
6 Contributor address; City; State; Zip Code <b>132 Clubhouse Dr. AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10/19/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Preston &amp; Jodi Gregg</b>	Amount of contribution (\$) <b>\$50.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>106 Rogues Roost Lakeway, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/21/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Frederick W. &amp; Martha M. Goff</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>12405 Carlsbad Dr. AUSTIN, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/23/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark &amp; Tammi Taylor</b>	Amount of contribution (\$) <b>\$20.00</b>	In-kind contribution description (if applicable) <b>N/A</b>
Contributor address; City; State; Zip Code <b>P.O. Box 341956 AUSTIN, TX 78734</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10/23/09</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John H. Aouville</b>	Amount of contribution (\$) <b>\$20.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>136 Sebastians Run AUSTIN, TX 78738</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

**SCHEDULE C**

1/1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C: 1	
2 FILER NAME TWO-PENNY PAC		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/5/09	5 Corporation / Labor Organization name DAY CABLE 6 Corporation / Labor Organization address; City; State; Zip Code 9606 N MOPAC Expressway, St. 125 AUSTIN, TX 78759	7 Amount of contribution (\$) \$25000 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable) N/A
Date 10/20/09	Corporation / Labor Organization name OFFICE KEEPERS Corporation / Labor Organization address; City; State; Zip Code P.O. BOX 340609 AUSTIN, TX 78734	Amount of contribution (\$) \$20000 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable) N/A
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

1/2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: <b>2</b>
2 FILER NAME <b>TWO-PENNY PAC</b>		3 ACCOUNT # (Ethics Commission filers)
4 Date <b>10/6/09</b>	5 Payee name <b>Lake Travis View</b> 6 Payee address; City; State; Zip Code <b>107 RR 620 S, PMB 5-F AUSTIN, TX 78734</b>	7 Amount (\$) <b>\$ 919.80</b>
8 Purpose of payment (See instructions regarding type of information required.)  (If travel outside of Texas, complete Schedule T)		9 <b>-- Complete if direct expenditure to benefit C/OH --</b> Candidate / Officeholder name Office sought Office held
Date <b>10/14/09</b>	Payee name <b>Home Depot</b> Payee address; City; State; Zip Code <b>3600 FM 620 South Bee Cave, TX 78738</b>	Amount (\$) <b>\$ 296.78</b>
Purpose of payment (See instructions regarding type of information required.) <b>Materials to fabricate &amp; install large campaign signs</b> (If travel outside of Texas, complete Schedule T)		<b>-- Complete if direct expenditure to benefit C/OH --</b> Candidate / Officeholder name Office sought Office held
Date <b>10/14/09</b>	Payee name <b>Home Depot</b> Payee address; City; State; Zip Code <b>3600 FM 620 South Bee Cave, TX 78738</b>	Amount (\$) <b>\$ 20.90</b>
Purpose of payment (See instructions regarding type of information required.) <b>Truck rental to transport materials for large campaign signs</b> (If travel outside of Texas, complete Schedule T)		<b>-- Complete if direct expenditure to benefit C/OH --</b> Candidate / Officeholder name Office sought Office held
Date <b>10/16/09</b>	Payee name <b>Home Depot</b> Payee address; City; State; Zip Code <b>3600 FM 620 South Bee Cave, TX 78738</b>	Amount (\$) <b>\$ 31.90</b>
Purpose of payment (See instructions regarding type of information required.) <b>Truck rental to transport Large campaign signs</b> (If travel outside of Texas, complete Schedule T)		<b>-- Complete if direct expenditure to benefit C/OH --</b> Candidate / Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

2/2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: <b>2</b>
2 FILER NAME <b>Two-Penny PAC</b>		3 ACCOUNT # (Ethics Commission filers)
4 Date <b>10/20/09</b>	5 Payee name <b>Lowe's Home Centers, Inc.</b>	7 Amount (\$) <b>\$ 13.10</b>
6 Payee address; City; State; Zip Code <b>12611 Suite 100 Shops Pkwy Bee Cave, TX 78738</b>		
8 Purpose of payment (See instructions regarding type of information required.) <b>Materials to fabricate &amp; install Large Campaign Signs</b> <small>(If travel outside of Texas, complete Schedule T)</small>		9 <b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
Date	Payee name  Payee address; City; State; Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.)  <small>(If travel outside of Texas, complete Schedule T)</small>		<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
Date	Payee name  Payee address; City; State; Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.)  <small>(If travel outside of Texas, complete Schedule T)</small>		<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
Date	Payee name  Payee address; City; State; Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.)  <small>(If travel outside of Texas, complete Schedule T)</small>		<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held

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