## **SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT**

#### FORM SPAC COVER SHEET PG 1

|    | ne SPAC Instruction omplete this form. | GUIDE explains how to                            | 1               | ACCOUNT # (Ethics Commission file 00056637 | lers)    | 2 PAGE#                  |                 |
|----|--|--|-----------------|--|----------|--------------------------|-----------------|
| 2  | COMMITTEE NAME                         |  |                 |  |          |                          |                 |
| 3  | Texans for Joe Straus                  |  |                 |  |          | OFFICE U                 | SE ONLY         |
|    | Toxano for occ circus                  |  |                 |  |          | Date Received            |                 |
|    |  |  |                 |  |          | 1                        |                 |
| 4  | COMMITTEE                              | ADDRESS / PO BOX; APT / SUITE #;                 | CIT             | Y; STATE;                                  | ZIP CODE |                          |                 |
|    | ADDRESS                                |  |                 |  |          |                          |                 |
|    | Change of Address                      | PO Box 90388                                     |                 |  |          |                          |                 |
|    | _ ·                                    | San Antonio, TX 78209                            |                 |  |          | Date Hand-delivered or I | Date Postmarked |
|    |  |  |                 |  |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |
| 5  | CAMPAIGN                               | MS / MRS / MR FIRST                              |                 |  | MI       | Receipt #                | Amount          |
|    | TREASURER                              | Mr. James W.                                     |                 |  |          | Date Processed           |                 |
|    | NAME                                   | NICKNAME LAST                                    |                 |  | SUFFIX   | Date 1 10003500          |                 |
|    |  | Jim Gorman                                       |                 |  | OOTTIX   | Date Imaged              |                 |
|    |  |  |                 |  |          |                          |                 |
| 6  | CAMPAIGN                               | STREET ADDRESS (NO PO BOX PLEASE);               | APT/SUITE       | #; CITY;                                   | STATE;   | ZIP CODE                 |                 |
|    | TREASURER'S                            | 7070 D   |                 |  |          |                          |                 |
|    | STREET ADDRESS (Residence or business) | 7373 Broadway Suite 508<br>San Antonio, TX 78209 |                 |  |          |                          |                 |
|    | (Nesidefiee of Busiliess)              |  |                 |  |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |
| 7  | CAMDAICN                               | STREET OR PO BOX;                                | APT / SUITE     | :#; CITY;                                  | STATE;   | ZIP CODE                 |                 |
| ′  | CAMPAIGN<br>TREASURER'S                | C.N.2.2. G.N. G 207.,                            | 7.1. 1.7.001.12 | J ,  | 017112,  | 2 0022                   |                 |
|    | MAILING ADDRESS                        | 7373 Broadway Suite 508                          |                 |  |          |                          |                 |
|    | Change of Address                      | San Antonio, ŤX 78209                            |                 |  |          |                          |                 |
|    | change of Address                      |  |                 |  |          |                          |                 |
|    |  | AREA CODE PHONE NUMBER                           |                 | EXTENSIO                                   | N.       |                          |                 |
| 8  | CAMPAIGN<br>TREASURER                  | THOME NOMBER                                     |                 | EXTENSIO                                   |          |                          |                 |
|    | PHONE                                  | (210) 821-7041                                   |                 |  |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |
| 9  | REPORT TYPE                            | January 15                                       | X 30            | Oth day before election                    |          | Exceeded \$50            | 00 limit        |
|    |  | July 15  | =               | h day before election                      |          |                          | tach PAC-DR)    |
|    |  |  |                 | unoff                                      |          | 10th day after           | •               |
|    |  |  |                 |  |          | treasurer termina        |                 |
| 10 | PERIOD COVERED                         | Month Day Year                                   |                 |  |          | Month Day                | Year            |
|    |  | 07/04/0000                                       |                 | THROUGH                                    |          | 00/05/06                 | 000             |
|    |  | 07/01/2008                                       |                 | IHROUGH                                    |          | 09/25/20                 | 108             |
|    | EL ECTION:                             |  |                 |  |          |                          |                 |
| 11 | ELECTION                               | ELECTION DATE ELE  Month Day Year                | ECTION TY       | PE .                                       |          |                          |                 |
|    |  | 11/04/2008                                       | Primary         | - Bunoff                                   |          | General                  | Special         |
|    |  | 11/04/2000                                       | J I IIIIIaiy    | Runoff                                     |          | Ceneral                  | Special         |
|    |  | l  |                 |  |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |
|    |  | G  | O TO PA         | AGE 2                                      |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |
|    |  |  |                 |  |          |                          |                 |

## **SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS**

## FORM SPAC COVER SHEET PG 2

(512)463-5800

| 12 COMMITTEE Tex  | xans for Joe Strau   | us   |  |                       | COUNT # (E    | thics Commission filers) |
|---|--|--|--|-----------------------|---------------|--------------------------|
| 13 COMMITTEE<br>PURPOSE   | CANDIDATE  | CANDIDATE / OFFICE<br>Joe Straus   | EHOLDER NAME   |                       |               |                          |
| (Attach lists on plain paper to complete this report if necessary.) | X officeholder   | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)  State Representative 121 |  |                       |               |                          |
| SUPPORT (Candidate or Measure)                                      |  | BALLOT IDENTIFICAT   |  | CTION DAT<br>Day Year |               |                          |
| (Candidate or Measure)  X ASSIST (Officeholder only)                | ☐ MEASURE  | DESCRIPTION  |  | _                     |               |                          |
|   |  |  |  |                       |               |                          |
| 14 CONTRIBUTION<br>TOTALS   |  |  | OF \$50 OR LESS (OTHER THAN<br>S OF LOANS), UNLESS ITEMIZED  |                       | \$            | 0.00                     |
|   | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) |  |  | \$                    | 43,134.32     |                          |
| EXPENDITURE<br>TOTALS   | 3. TOTAL P   | OLITICAL EXPENDITURES (  | OF \$50 OR LESS, UNLESS ITEMIZED   | )<br>                 | \$            | 227.21                   |
|   | 4. TOTAL P   | POLITICAL EXPENDITURES   |  |                       | \$            | 28,733.52                |
| CONTRIBUTION<br>BALANCE   |  | POLITICAL CONTRIBUTIONS<br>REPORTING PERIOD                                      | MAINTAINED AS OF THE LAST DAY  | ·                     | \$            | 603,722.00               |
| OUTSTANDING<br>LOAN TOTALS  |  | PRINCIPAL AMOUNT OF ALL<br>AY OF THE REPORTING PER                               | OUTSTANDING LOANS AS OF THE<br>RIOD  |                       | \$            | 0.00                     |
| 15 AFFIDAVIT  |  |  |  | -                     |               |                          |
|   |  |  | I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Coc | all informa           |               |                          |
|   | Jim Gorman Signature of Campaign Treasurer   |  |  |                       |               |                          |
| AFFIX NOTARY S  | STAMP / SEAL ABOV  | /E   |  |                       |               |                          |
| Sworn to and subscrib   | Sworn to and subscribed before me, by the said , this the day                        |  |  |                       |               |                          |
| of, 20, to certify which, witness my hand and seal of office.       |  |  |  |                       |               |                          |
| , to certify willors, without and sear of office.                   |  |  |  |                       |               |                          |
| Signature of officer admir  | inistering oath  | Print name of offic  | er administering oath  | Title of o            | fficer admini | stering oath             |

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

#### SCHEDULE A

| The Instruction                    | אס Guide explains how to complete this form.  |  | 1 PAGE #<br>Schedule: 1/      | 10 Report: 3/34                                    |
|------------------------------------|---|--|-------------------------------|--|
| 2 FILER NAME                       | Texans for Joe Straus   |  | 3 ACCOUNT# 00056637           | (Ethics Commission filers)                         |
| 4 Date                             | 5 Full name of contributor ☐ out-of-state PAC (ID# Ahlberg, Trevor                    | <u>+)</u>                              | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/06/2008                         | 6 Contributor address; City; State; Zip Code  |  | \$1,250.00                    | <br>   |
|                                    | Irving, TX 75038  |  |                               | I  |
|                                    |   |  | •                             | Texas, complete Schedule T)                        |
| 9 Principal occup<br>President & C | ation / Job title (See Instructions)<br>CEO   | 10 Employer (See In:<br>Cottonwood Fin |                               |  |
| Date                               | Full name of contributor 🛛 out-of-state PAC (ID#American Council of Life Insurers PAC | <u>C00147066</u> )                     | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 08/06/2008                         | Contributor address; City; State; Zip Code  |  | \$250.00                      | <br>   |
|                                    | Washington, DC 20001  |  |                               | l  |
|                                    |   |  | · ·                           | Texas, complete Schedule T)                        |
| Principal occup                    | ation / Job title (See Instructions)  | Employer (See In:                      | structions)                   |  |
| Date                               | Full name of contributor  | ŧ)                                     | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/24/2008                         | Contributor address; City; State; Zip Code  |  | \$1,000.00                    | I<br>I   |
|                                    | Austin, TX 78768  |  | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup                    | ation / Job title (See Instructions)  | Employer (See In:                      | structions)                   |  |
|                                    |   |  |                               |  |
| Date                               | Full name of contributor  uut-of-state PAC (ID# AT&T Texas PAC                        | <u>t</u> )                             | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                         | Contributor address; City; State; Zip Code  |  | \$7,000.00                    | <br>   |
|                                    | Austin, TX 78701  |  |                               | l  |
|                                    |   |  | <u> </u>                      | Texas, complete Schedule T)                        |
| Principal occup                    | ation / Job title (See Instructions)  | Employer (See In:                      | structions)                   |  |
| Date                               | Full name of contributor  | <u> </u>                               | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/05/2008                         | Contributor address; City; State; Zip Code  |  | \$500.00                      | <br>   |
|                                    | Austin, TX 78701  |  |                               | I  |
|                                    |   |  | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup                    | ation / Job title (See Instructions)  | Employer (See In                       | structions)                   |  |

|   | The Instruction                   | ON GUIDE explains how to complete this form.                      |                                      | 1 PAGE #<br>Schedule: 2/      | 10 Report: 4/34                                    |  |  |
|---|-----------------------------------|---|--------------------------------------|-------------------------------|--|--|--|
| 2 | FILER NAME                        | Texans for Joe Straus   |                                      | 3 ACCOUNT # 00056637          | (Ethics Commission filers)                         |  |  |
| 4 | Date                              | 5 Full name of contributor ☐ out-of-state PAC (ID# Bresnen, Steve | ·)                                   | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |  |  |
|   | 09/11/2008                        | 6 Contributor address; City; State; Zip Code                      |                                      | \$250.00                      | <br>   |  |  |
|   |                                   | Austin, TX 78701  |                                      | (If travel outside of         | Texas, complete Schedule T)                        |  |  |
| 9 | Principal occup<br>Attorney       | pation / Job title (See Instructions)                             | 10 Employer (See In<br>Self Employed | -                             |  |  |  |
|   | Date                              | Full name of contributor  | 1 )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |  |  |
|   | 07/24/2008                        | Contributor address; City; State; Zip Code                        |                                      | \$10,000.00                   | <br>   |  |  |
|   |                                   | San Antonio, TX 78283   |                                      | (If travel outside of         | Texas, complete Schedule T)                        |  |  |
|   | Principal occur                   | pation / Job title (See Instructions)                             | Employer (See In                     | -                             |  |  |  |
|   | Chairman                          | dustry out the (coe mendations)                                   | HEB Grocery                          |                               |  |  |  |
|   | Date                              | Full name of contributor  ut-of-state PAC (ID# Cain, Donald       | )                                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |  |  |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                        |                                      | \$350.00                      | <br>   |  |  |
|   |                                   | Oklahoma City, OK 73102   |                                      | (If travel outside of         | Texas, complete Schedule T)                        |  |  |
|   | Principal occup<br>President      | ation / Job title (See Instructions)                              | Employer (See In<br>AT&T             | structions)                   |  |  |  |
|   | Date                              | Full name of contributor  | !)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |  |  |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                        |                                      | \$100.00                      | <br>   |  |  |
|   |                                   | Austin, TX 78768  |                                      | (If travel outside of         | Texas, complete Schedule T)                        |  |  |
|   | Principal occup<br>Legislative Co | pation / Job title (See Instructions) onsultant                   | Employer (See In Self                | structions)                   |  |  |  |
|   |                                   | _   |                                      | т                             |  |  |  |
|   | Date                              | Full name of contributor  | !)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |  |  |
|   | 08/26/2008                        | Contributor address; City; State; Zip Code                        |                                      | \$500.00                      | <br>   |  |  |
|   |                                   | Houston, TX 77019   |                                      | (If travel outside of         | Texas, complete Schedule T)                        |  |  |
|   | Principal occup<br>Investor       | ation / Job title (See Instructions)                              | Employer (See In<br>Osborn Heirs     | •                             | ,            |  |  |
|   |                                   |   |                                      |                               |  |  |  |

|   | The Instruction                   | ON GUIDE explains how to complete this form.                     |                                    | 1 PAGE #<br>Schedule: 3/1     | 10 Report: 5/34                                    |
|---|-----------------------------------|--|------------------------------------|-------------------------------|--|
| 2 | FILER NAME                        | Texans for Joe Straus  |                                    | 3 ACCOUNT # 00056637          | (Ethics Commission filers)                         |
| 4 | Date                              | 5 Full name of contributor ☐ out-of-state PAC (ID# Ellmer, Mindy | )                                  | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
|   | 09/10/2008                        | 6 Contributor address; City; State; Zip Code                     |                                    | \$300.00                      | <br>   |
|   |                                   | Austin, TX 78704   |                                    |                               | I  |
|   |                                   |  |                                    |                               | Texas, complete Schedule T)                        |
| 9 | Principal occup<br>Government     | ation / Job title (See Instructions)<br>Affairs                  | 10 Employer (See In:<br>Self       | structions)                   |  |
|   | Date                              | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/11/2008                        | Contributor address; City; State; Zip Code                       |                                    | \$500.00                      | <br>   |
|   |                                   | Austin, TX 78701   |                                    |                               | I  |
|   |                                   |  |                                    | -                             | Texas, complete Schedule T)                        |
|   | Principal occup<br>Attorney       | ation / Job title (See Instructions)                             | Employer (See In:<br>Self-employed | structions)                   |  |
|   | Date                              | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                       |                                    | \$500.00                      | <br>   |
|   |                                   | Austin, TX 78701   |                                    | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup<br>Government     | ation / Job title (See Instructions)<br>Affairs                  | Employer (See In:<br>Self-employed | structions)                   |  |
|   | Date                              | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/01/2008                        | Contributor address; City; State; Zip Code                       |                                    | \$2,000.00                    | <br>   |
|   |                                   | Houston, TX 77019  |                                    |                               | I  |
|   | Principal occur                   | ation / Job title (See Instructions)                             | Employer (See In:                  | ,                             | Texas, complete Schedule T)                        |
|   | Investments                       | ation 7 300 title (See instructions)                             | Self                               | structions)                   |  |
|   | Date                              | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                       |                                    | \$200.00                      | l<br>I   |
|   |                                   | El Paso, TX 79924  |                                    |                               | I  |
|   |                                   |  |                                    | <u> </u>                      | Texas, complete Schedule T)                        |
|   | Principal occup<br>Legislative Co | ation / Job title (See Instructions) onsultant                   | Employer (See In:<br>Self          | structions)                   |  |

| The Instruction             | ON GUIDE explains how to complete this form.                                      |                                     | 1 PAGE #<br>Schedule: 4/      | 10 Report: 6/34                                    |
|-----------------------------|---|-------------------------------------|-------------------------------|--|
| 2 FILER NAME                | Texans for Joe Straus   |                                     | 3 ACCOUNT# 00056637           | (Ethics Commission filers)                         |
| 4 Date                      | 5 Full name of contributor ☐ out-of-state PAC (ID# Health Texas Medical Group PAC | <i>‡</i> )                          | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/24/2008                  | 6 Contributor address; City; State; Zip Code<br>San Antonio, TX 78201             |                                     | \$500.00                      | <br>   |
|                             | San Antonio, 17 70201   |                                     |                               |  |
| 9 Principal occur           | pation / Job title (See Instructions)   | 10 Employer (See In                 | l -                           | Texas, complete Schedule T)                        |
| 9 Fillicipal occup          | valion / Job title (See instructions)   | 10 Employer (See in                 | structions)                   |  |
| Date                        | Full name of contributor  uut-of-state PAC (ID# Hicks, R. Steven                  | #)                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 07/15/2008                  | Contributor address; City; State; Zip Code  |                                     | \$500.00                      | <br>   |
|                             | Austin, TX 78701  |                                     | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup<br>Chairman | pation / Job title (See Instructions)   | Employer (See In<br>Capstar Commi   |                               |  |
| Date                        | Full name of contributor  | <u> </u>                            | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                  | Contributor address; City; State; Zip Code  |                                     | \$1,000.00                    | <br>   |
|                             | Austin, TX 78701  |                                     | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup             | pation / Job title (See Instructions)   | Employer (See In<br>Hillco Partners | structions)                   |  |
| Date                        | Full name of contributor  | #)                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 08/25/2008                  | Contributor address; City; State; Zip Code  |                                     | \$500.00                      | <br>   |
|                             | Houston, TX 77019   |                                     |                               | ı  |
| Dringing again              | pation / Job title (See Instructions)   | Employer (Cools                     | <u> </u>                      | Texas, complete Schedule T)                        |
| Investments                 | valion / Job title (See instructions)   | Employer (See In<br>Self            | sti uctions)                  |  |
| Date                        | Full name of contributor  | #)                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                  | Contributor address; City; State; Zip Code  |                                     | \$500.00                      | <br>   |
|                             | Round Rock, TX 78664  |                                     |                               | l<br>  |
| Dringing aggre              | potion / Joh title (See Instructions)   | Employer /Coo In                    | <u> </u>                      | Texas, complete Schedule T)                        |
| Executive                   | pation / Job title (See Instructions)   | Employer (See In<br>United Pawnbro  |                               |  |

|   | The Instruction               | ON GUIDE explains how to complete this form.   |                             | 1 PAGE #<br>Schedule: 5/                       | 10 Report: 7/34                                    |  |  |
|---|-------------------------------|--|-----------------------------|--|--|--|--|
| 2 | FILER NAME                    | Texans for Joe Straus  |                             | 3 ACCOUNT# 00056637                            | (Ethics Commission filers)                         |  |  |
| 4 | Date                          | 5 Full name of contributor ☐ out-of-state PAC (ID# Hughes, Lisa                        | <u> </u>                    | 7 Amount of contribution (\$)                  | 8 In-kind contribution description (if applicable) |  |  |
|   | 09/09/2008                    | 6 Contributor address; City; State; Zip Code   |                             | \$150.00                                       | <br>   |  |  |
|   |                               | Austin, TX 78759   |                             | (If travel outside of                          | Texas, complete Schedule T)                        |  |  |
| 9 | Principal occup<br>Government | ation / Job title (See Instructions)<br>Affairs  | 10 Employer (See In<br>Self | structions)                                    |  |  |  |
|   | Date                          | Full name of contributor   | <u> </u>                    | Amount of contribution (\$)                    | In-kind contribution description (if applicable)   |  |  |
|   | 09/19/2008                    | Contributor address; City; State; Zip Code   |                             | \$250.00                                       | <br>   |  |  |
|   |                               | Houston, TX 77019  |                             | (If travel outside of                          | Texas, complete Schedule T)                        |  |  |
|   | Principal occup               | ation / Job title (See Instructions)   | Employer (See In            | structions)                                    |  |  |  |
|   |                               |  |                             | <u>,                                      </u> |  |  |  |
|   | Date                          | Full name of contributor  ut-of-state PAC (ID# K&L Gates Committee for Good Government | <u> </u>                    | Amount of contribution (\$)                    | In-kind contribution description (if applicable)   |  |  |
|   | 09/23/2008                    | Contributor address; City; State; Zip Code   |                             | \$250.00                                       | <br>   |  |  |
|   |                               | Austin, TX 78701   |                             | (If travel outside of                          | Texas, complete Schedule T)                        |  |  |
|   | Principal occup               | eation / Job title (See Instructions)  | Employer (See In            | <u> </u>                                       | , , <u>,     </u>                                  |  |  |
|   | т ппораг осоар                | dustry out the (coe mendations)  | Zimpioyor (Goo iii          |  |  |  |  |
|   | Date                          | Full name of contributor   | <u> </u>                    | Amount of contribution (\$)                    | In-kind contribution description (if applicable)   |  |  |
|   | 08/26/2008                    | Contributor address; City; State; Zip Code  Houston, TX 77056                          |                             | \$1,000.00                                     | <br>   |  |  |
|   |                               | Tiousion, TX 77030   |                             | (If travel outside of                          | Texas, complete Schedule T)                        |  |  |
|   | Principal occup               | ation / Job title (See Instructions)   | Employer (See In            | structions)                                    |  |  |  |
|   | Date                          | Full name of contributor   | <u> </u>                    | Amount of contribution (\$)                    | In-kind contribution description (if applicable)   |  |  |
|   | 09/09/2008                    | Contributor address; City; State; Zip Code   |                             | \$200.00                                       | l  |  |  |
|   |                               | Austin, TX 78701   |                             |  | I  |  |  |
|   |                               |  |                             | (If travel outside of                          | Texas, complete Schedule T)                        |  |  |
|   | Principal occur               | ation / Job title (See Instructions)   | Employer (See In            | <u> </u>                                       | , ,, <u>,</u>                                      |  |  |
|   | Attorney at La                |  | Self                        | ,  |  |  |  |

| The Instruction                    | ON GUIDE explains how to complete this form.                       |                                    | 1 PAGE #<br>Schedule: 6/1     | 10 Report: 8/34                                    |
|------------------------------------|--|------------------------------------|-------------------------------|--|
| 2 FILER NAME                       | Texans for Joe Straus  |                                    | 3 ACCOUNT# 00056637           | (Ethics Commission filers)                         |
| 4 Date                             | 5 Full name of contributor ☐ out-of-state PAC (ID# Lahourcade, Lee | )                                  | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 08/15/2008                         | 6 Contributor address; City; State; Zip Code Houston, TX 77056     |                                    | \$1,000.00                    | <br>   |
|                                    | Trousion, TX 77000   |                                    |                               | I<br>  |
|                                    |  |                                    |                               | Texas, complete Schedule T)                        |
| 9 Principal occup<br>President & C | pation / Job title (See Instructions) DEO                          | 10 Employer (See In Vaughn Nelson  |                               |  |
| Date                               | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 08/30/2008                         | Contributor address; City; State; Zip Code                         |                                    | \$250.00                      | <br>   |
|                                    | Houston, TX 77027  |                                    | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup                    | ation / Job title (See Instructions)                               | Employer (See In                   | structions)                   |  |
| Date                               | Full name of contributor   | )                                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                         | Contributor address; City; State; Zip Code                         |                                    | \$500.00                      | <br>   |
|                                    | Austin, TX 78701   |                                    | `                             | Texas, complete Schedule T)                        |
| Principal occup<br>Government      | pation / Job title (See Instructions) Affairs                      | Employer (See In<br>Ron Lewis & As | ,                             |  |
| Date                               | Full name of contributor   | :)                                 | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                         | Contributor address; City; State; Zip Code  Austin, TX 78759       |                                    | \$100.00                      | <br>   |
|                                    | Additi, 17,70700   |                                    | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occur                    | L<br>pation / Job title (See Instructions)                         | Employer (See In                   |                               | Tomas, complete constants 1,                       |
| Government                         | Affairs  | Camden Public                      |                               |  |
| Date                               | Full name of contributor   | !)                                 | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008                         | Contributor address; City; State; Zip Code                         |                                    | \$250.00                      | <br>   |
|                                    | Cedar Park, TX 78613   |                                    | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup<br>Government      | I<br>vation / Job title (See Instructions)<br>Affairs              | Employer (See In<br>Self           | l .                           | · · · · · · · · · · · · · · · · · · ·              |

|   | The Instruction                   | ON GUIDE explains how to complete this form.                      |   | 1 PAGE #<br>Schedule: 7/      | 10 Report: 9/34                                    |
|---|-----------------------------------|---|---|-------------------------------|--|
| 2 | FILER NAME                        | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637          | (Ethics Commission filers)                         |
| 4 | Date                              | 5 Full name of contributor ☐ out-of-state PAC (ID# Matthews, Matt | )                                       | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
|   | 08/07/2008                        | 6 Contributor address; City; State; Zip Code                      |   | \$250.00                      | <br>   |
|   |                                   | Austin, TX 78746  |   |                               | I  |
|   |                                   |   |   | (If travel outside of         | Texas, complete Schedule T)                        |
| 9 |                                   | ation / Job title (See Instructions)<br>Affairs Consultant        | 10 Employer (See In:<br>Matt Matthews 8 |                               |  |
|   | Date                              | Full name of contributor  | )                                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 07/02/2008                        | Contributor address; City; State; Zip Code                        |   | \$1,000.00                    | I<br>I   |
|   |                                   | Chapel Hill, NC 27517   |   |                               | I  |
|   |                                   |   |   | · ·                           | Texas, complete Schedule T)                        |
|   | Principal occup<br>CEO            | ation / Job title (See Instructions)                              | Employer (See In:<br>The Wakefield (    |                               |  |
|   | Date                              | Full name of contributor  | )                                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                        |   | \$250.00                      | <br>   |
|   |                                   | Austin, TX 78763  |   |                               | I  |
|   | Deinninglann                      | ation / Joh title (Con Joseph ations)                             | Frankrian (Cooks                        | -                             | Texas, complete Schedule T)                        |
|   | Government                        | ation / Job title (See Instructions)<br>Affairs                   | Employer (See In:<br>Self               | structions)                   |  |
|   | Date                              | Full name of contributor  | )                                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/11/2008                        | Contributor address; City; State; Zip Code  Austin, TX 78768      |   | \$350.00                      | <br>   |
|   |                                   |   |   | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup<br>Attorney       | ation / Job title (See Instructions)                              | Employer (See In:<br>Self               | structions)                   |  |
|   | Date                              | Full name of contributor  | )                                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 09/09/2008                        | Contributor address; City; State; Zip Code                        |   | \$1,000.00                    | <br>   |
|   |                                   | Austin, TX 78701  |   |                               | I  |
|   |                                   |   |   | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup<br>Legislative Co | ation / Job title (See Instructions)<br>onsultant                 | Employer (See In:<br>Self               | structions)                   |  |

|   | The Instruction                 | אס Guide explains how to complete this form.   |  | 1 PAGE #<br>Schedule: 8/        | 10 Report: 10/34                                   |
|---|---------------------------------|--|--|---------------------------------|--|
| 2 | FILER NAME                      | Texans for Joe Straus  |  | 3 ACCOUNT# 00056637             | (Ethics Commission filers)                         |
| 4 | Date                            | 5 Full name of contributor ☐ out-of-state PAC (ID# San Antonio Apartment Association PAC | )                                      | 7 Amount of contribution (\$)   | 8 In-kind contribution description (if applicable) |
|   | 09/23/2008                      | 6 Contributor address; City; State; Zip Code<br>San Antonio, TX 78249                    |  | \$1,000.00                      | <br> <br>  |
|   |                                 |  |  | (If travel outside of           | Texas, complete Schedule T)                        |
| 9 | Principal occup                 | ation / Job title (See Instructions)   | 10 Employer (See In:<br>San Antonio Ap | structions)<br>artment Associat |  |
|   | Date                            | Full name of contributor   | ·)                                     | Amount of contribution (\$)     | In-kind contribution description (if applicable)   |
|   | 09/09/2008                      | Contributor address; City; State; Zip Code   |  | \$500.00                        | <br>   |
|   |                                 | Austin, TX 78768   |  |                                 | l  |
|   |                                 |  |  |                                 | Texas, complete Schedule T)                        |
|   | Principal occup<br>Govt Affairs | ation / Job title (See Instructions)   | Employer (See In:<br>The Schlueter (   |                                 |  |
|   | Date                            | Full name of contributor  ut-of-state PAC (ID# Shipton, Patricia                         | )                                      | Amount of contribution (\$)     | In-kind contribution description (if applicable)   |
|   | 09/09/2008                      | Contributor address; City; State; Zip Code   |  | \$500.00                        | <br>   |
|   |                                 | Austin, TX 78701   |  | (If travel outside of           | Texas, complete Schedule T)                        |
|   | Principal occup<br>Government   | ation / Job title (See Instructions)<br>Affairs  | Employer (See In:<br>Self              | structions)                     |  |
|   | Date                            | Full name of contributor   | )                                      | Amount of contribution (\$)     | In-kind contribution description (if applicable)   |
|   | 09/09/2008                      | Contributor address; City; State; Zip Code Austin, TX 78701                              |  | \$500.00                        | <br>   |
|   |                                 |  |  | (If travel outside of           | Texas, complete Schedule T)                        |
|   | Principal occup<br>Govt Affairs | pation / Job title (See Instructions)  | Employer (See In:<br>The Sibley Grou   |                                 |  |
|   | Date                            | Full name of contributor   | )                                      | Amount of contribution (\$)     | In-kind contribution description (if applicable)   |
|   | 08/27/2008                      | Contributor address; City; State; Zip Code   |  | \$250.00                        | <br>   |
|   |                                 | Houston, TX 77056  |  |                                 | I  |
|   |                                 |  |  | (If travel outside of           | Texas, complete Schedule T)                        |
|   | Principal occup                 | ation / Job title (See Instructions)   | Employer (See In:                      | structions)                     |  |
|   |                                 |  |  |                                 |  |

| The Instruction   | ON GUIDE explains how to complete this form.                                       |                                      | 1 PAGE #<br>Schedule: 9/1     | 10 Report: 11/34                                   |
|-------------------|--|--------------------------------------|-------------------------------|--|
| 2 FILER NAME      | Texans for Joe Straus  |                                      | 3 ACCOUNT# 00056637           | (Ethics Commission filers)                         |
| 4 Date            | 5 Full name of contributor ☐ out-of-state PAC (ID# Texas Apartment Association PAC | )                                    | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 09/23/2008        | 6 Contributor address; City; State; Zip Code                                       |                                      | \$1,000.00                    | <br>   |
|                   | Austin, TX 78701   |                                      |                               | l  |
|                   |  |                                      |                               | Texas, complete Schedule T)                        |
| 9 Principal occup | ation / Job title (See Instructions)   | 10 Employer (See In<br>Texas Apartme |                               |  |
| Date              | Full name of contributor   | £)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 08/29/2008        | Contributor address; City; State; Zip Code   |                                      | \$500.00                      | <br>   |
|                   | Waco, TX 76702   |                                      |                               | I  |
| 5                 | T. (1) 49 (6 1) 4 1  |                                      | l -                           | Texas, complete Schedule T)                        |
| Principal occup   | ation / Job title (See Instructions)   | Employer (See In                     | structions)                   |  |
| Date              | Full name of contributor   | £)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008        | Contributor address; City; State; Zip Code   |                                      | \$1,000.00                    | <br>   |
|                   | Austin, TX 78701   |                                      | (If travel outside of         | Texas, complete Schedule T)                        |
| Principal occup   | ation / Job title (See Instructions)   | Employer (See In                     | structions)                   |  |
| Date              | Full name of contributor   | <u> </u>                             | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 09/09/2008        | Contributor address; City; State; Zip Code   |                                      | \$500.00                      | <br>   |
|                   | Austin, TX 78701   |                                      |                               | I  |
| D                 |  |                                      |                               | Texas, complete Schedule T)                        |
| Government        | ation / Job title (See Instructions)<br>Affairs                                    | Employer (See In<br>Self             | structions)                   |  |
| Date              | Full name of contributor   | 1                                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
| 07/03/2008        | Contributor address; City; State; Zip Code   |                                      | \$500.00                      | <br>   |
|                   | San Antonio, TX 78288  |                                      |                               | l  |
| D                 |  |                                      | <u> </u>                      | Texas, complete Schedule T)                        |
| Principal occup   | ation / Job title (See Instructions)   | Employer (See In                     | structions)                   |  |

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

#### SCHEDULE A

| The Instruction                  | ON GUIDE explains how to complete this form.  |                              | 1 PAGE #<br>Schedule: 10      | /10 Report: 12/34  |
|----------------------------------|---|------------------------------|-------------------------------|--|
| 2 FILER NAME                     | Texans for Joe Straus   |                              | 3 ACCOUNT# 00056637           | (Ethics Commission filers)   |
| 4 Date                           | 5 Full name of contributor ☐ out-of-state PAC (ID# USAA Employee Political Action Ctte. | #)                           | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)                 |
| 09/25/2008                       | 6 Contributor address; City; State; Zip Code<br>San Antonio, TX 78288                   |                              | \$500.00                      | <br>   |
|                                  | Carrantonio, 17 70200   |                              | (If travel outside of         | Texas, complete Schedule T)  |
| 9 Principal occup                | pation / Job title (See Instructions)   | 10 Employer (See In          |                               |  |
| Date                             | Full name of contributor  | #)                           | Amount of contribution (\$)   | In-kind contribution description (if applicable) Food and Beverage |
| 09/09/2008                       | Contributor address; City; State; Zip Code Austin, TX 78746                             |                              | \$884.32                      | <br>   |
|                                  | Austin, 17,70740  |                              | (If travel outside of         | Texas, complete Schedule T)  |
| Principal occup<br>Assistant Tre | pation / Job title (See Instructions) asurer  | Employer (See In<br>AT&T PAC |                               |  |
| Date                             | Full name of contributor  | #)                           | Amount of contribution (\$)   | In-kind contribution description (if applicable)                   |
| 08/27/2008                       | Contributor address; City; State; Zip Code  |                              | \$1,000.00                    | <u> </u><br>   |
|                                  | San Antonio, TX 78201   |                              |                               | I  |
|                                  |   |                              | ,                             | Texas, complete Schedule T)  |
| Principal occup                  | pation / Job title (See Instructions)   | Employer (See In             | structions)                   |  |
|                                  |   |                              |                               |  |

| The Instruction                           | ON GUIDE explains how to complete this form.                                     |   | 1 PAGE #<br>Schedule: 1/19      | 9 Report: 13/34                 |
|---|--|---|---------------------------------|---------------------------------|
| 2 FILER NAME                              | Texans for Joe Straus  |   | 3 ACCOUNT # 00056637            | (Ethics Commission filers)      |
| 4 Date                                    | 5 Payee name<br>4040 Broadway Building   | •   |                                 | 7 Amount (\$)                   |
| 07/02/2008                                | 6 Payee address; City; State; Zip Code<br>4040 Broadway<br>San Antonio, TX 78209 |   |                                 | \$562.50                        |
| 8 Purpose of pay required.)  Desc:Rent    | ment (See instructions regarding type of information                             | 9 ** Complete if direct<br>Candidate / Officehold | expenditure to bene<br>er name: | fit Candidate/Officeholder **   |
| (H  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                    |                                 |                                 |
| Date                                      | Payee name<br>4040 Broadway Building   |   |                                 | Amount<br>(\$)                  |
| 07/30/2008                                | Payee address; City; State; Zip Code<br>4040 Broadway<br>San Antonio, TX 78209   |   |                                 | \$74.73                         |
| Purpose of pay<br>required.)<br>Desc:Rent | /ment (See instructions regarding type of information                            | ** Complete if direct Candidate / Officehold      |                                 | fit Candidate/Officeholder **   |
| (H  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                    |                                 |                                 |
| Date                                      | Payee name<br>4040 Broadway Building   |   |                                 | Amount<br>(\$)                  |
| 08/01/2008                                | Payee address; City; State; Zip Code<br>4040 Broadway<br>San Antonio, TX 78209   |   |                                 | \$599.87                        |
| Purpose of pay required.)  Desc:Rent      | /ment (See instructions regarding type of information                            | ** Complete if direct Candidate / Officehold      | expenditure to bene<br>er name: | fit Candidate/Officeholder **   |
| (If                                       | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                    |                                 |                                 |
| Date                                      | Payee name<br>4040 Broadway Building   |   |                                 | Amount<br>(\$)                  |
| 09/02/2008                                | Payee address; City; State; Zip Code<br>4040 Broadway<br>San Antonio, TX 78209   |   |                                 | \$600.00                        |
| Purpose of pay<br>required.)<br>Desc:Rent | ment (See instructions regarding type of information                             | ** Complete if direct<br>Candidate / Officehold   |                                 | fit Candidate/Officeholder **   |
| (If                                       | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                    |                                 | Electronic Filing Version 2 3 6 |

| The Instruction   | ON GUIDE explains how to complete this form.  |  | 1 PAGE #<br>Schedule: 2/19 Report: 14/34 |                                |
|---|---|--|--|--------------------------------|
| 2 FILER NAME  | Texans for Joe Straus   |  | 3 ACCOUNT # 00056637                     | (Ethics Commission filers)     |
| 4 Date  | 5 Payee name<br>Aristotle Int. Inc.   |  |  | 7 Amount (\$)                  |
| 07/17/2008  | 6 Payee address; City; State; Zip Code 205 Pennsylvania Ave SE Washington, DC 20003 |  |  | \$1,200.00                     |
| 8 Purpose of pay required.)  Desc:Compliance                                    | /ment (See instructions regarding type of information                               | 9 · · Complete if direct<br>Candidate / Officehold |  | fit Candidate/Officeholder     |
| •   | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                     |  |                                |
| Date  | Payee name<br>AT&T  |  |  | Amount<br>(\$)                 |
| 07/07/2008  | Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263                 |  |  | \$93.31                        |
| required.)  | ment (See instructions regarding type of information                                | ** Complete if direct<br>Candidate / Officehole    |  | efit Candidate/Officeholder •• |
| Desc:Austin office utilities  (If travel outside of Texas, complete Schedule T) |   | Office sought:<br>Office held:                     |  |                                |
| Date  | Payee name<br>AT&T  |  |  | Amount<br>(\$)                 |
| 07/30/2008  | Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263                 |  |  | \$97.57                        |
| Purpose of pay required.)  Desc:Austin Office                                   | /ment (See instructions regarding type of information                               | Complete if direct Candidate / Officehold          |  | efit Candidate/Officeholder    |
|   | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                     |  |                                |
| Date  | Payee name<br>AT&T  |  |  | Amount<br>(\$)                 |
| 09/10/2008  | Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263                 |  |  | \$96.13                        |
| Purpose of pay required.)  Desc:Austin Office                                   | ment (See instructions regarding type of information ce Utilities                   | ** Complete if direct<br>Candidate / Officehold    |  | efit Candidate/Officeholder •• |
|   | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                     |  |                                |

| The Instruction                                  | ON GUIDE explains how to complete this form.  |   | 1 PAGE #<br>Schedule: 3/19 | 9 Report: 15/34                |
|--|---|---|----------------------------|--------------------------------|
| 2 FILER NAME                                     | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637       | (Ethics Commission filers)     |
| 4 Date   | 5 Payee name<br>AT&T Mobility   |   |                            | 7 Amount (\$)                  |
| 07/07/2008                                       | 6 Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265                 |   |                            | \$116.80                       |
| 8 Purpose of pay<br>required.)<br>Desc:Utilities | yment (See instructions regarding type of information                                 | 9 ** Complete if direct<br>Candidate / Officehold<br>Office sought: |                            | fit Candidate/Officeholder **  |
| (I   | f travel outside of Texas, complete Schedule T)                                       | Office held:  |                            |                                |
| Date   | Payee name<br>AT&T Mobility   |   |                            | Amount<br>(\$)                 |
| 07/30/2008                                       | Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265                   |   |                            | \$148.54                       |
| Purpose of pay<br>required.)<br>Desc:Utilities   | yment (See instructions regarding type of information                                 | ** Complete if direct<br>Candidate / Officehole                     |                            | fit Candidate/Officeholder *** |
| (I   | f travel outside of Texas, complete Schedule T)                                       | Office sought:<br>Office held:                                      |                            |                                |
| Date   | Payee name<br>AT&T Mobility   |   |                            | Amount<br>(\$)                 |
| 08/29/2008                                       | Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265                   |   |                            | \$291.71                       |
| Purpose of pay<br>required.)<br>Desc:Utilities   | yment (See instructions regarding type of information                                 | ** Complete if direct<br>Candidate / Officehold                     |                            | fit Candidate/Officeholder **  |
| (I   | f travel outside of Texas, complete Schedule T)                                       | Office sought:<br>Office held:                                      |                            |                                |
| Date   | Payee name<br>Bearse & Company  |   |                            | Amount<br>(\$)                 |
| 09/18/2008                                       | Payee address; City; State; Zip Code<br>919 Congress Ave Ste 1500<br>Austin, TX 78701 |   |                            | \$275.00                       |
| Purpose of pay<br>required.)  Desc:Consultant    | yment (See instructions regarding type of information                                 | Candidate / Officehole  |                            | fit Candidate/Officeholder ••  |
|  | f travel outside of Texas, complete Schedule T)                                       | Office sought:<br>Office held:                                      |                            |                                |

| The Instruction   | ON GUIDE explains how to complete this form.                                       |  | 1 PAGE #<br>Schedule: 4/1        | 9 Report: 16/34               |
|---|--|--|----------------------------------|-------------------------------|
| 2 FILER NAME  | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637             | (Ethics Commission filers)    |
| 4 Date  | 5 Payee name<br>Bistro 88  |  |                                  | 7 Amount (\$)                 |
| 09/09/2008  | 6 Payee address; City; State; Zip Code 2712 Bee Cave Rd Austin, TX 78746           |  |                                  | \$331.99                      |
| 8 Purpose of pay required.)  Desc:Business N                              | /ment (See instructions regarding type of information                              | 9 · · Complete if direct<br>Candidate / Officeholo |                                  | fit Candidate/Officeholder ** |
|   | f travel outside of Texas, complete Schedule T)                                    | Office sought:<br>Office held:                     |                                  |                               |
| Date  | Payee name<br>Bookstand Retail   |  |                                  | Amount<br>(\$)                |
| 07/30/2008  | Payee address; City; State; Zip Code Baltimore Airport Linthicum Heights, MD 21090 |  |                                  | \$105.99                      |
| required.)  | /ment (See instructions regarding type of information                              | Complete if direct Candidate / Officehole          | expenditure to bene<br>der name: | fit Candidate/Officeholder    |
| Desc:Computer Supplies  (If travel outside of Texas, complete Schedule T) |  | Office sought:<br>Office held:                     |                                  |                               |
| Date  | Payee name<br>Brewer, Meredith   |  |                                  | Amount<br>(\$)                |
| 07/08/2008  | Payee address; City; State; Zip Code<br>734 Susie Ct<br>San Antonio, TX 78216      |  |                                  | \$747.58                      |
| Purpose of pay<br>required.)<br>Desc:Personnel                            | /ment (See instructions regarding type of information                              | ** Complete if direct<br>Candidate / Officehold    | expenditure to bene<br>der name: | efit Candidate/Officeholder   |
|   | f travel outside of Texas, complete Schedule T)                                    | Office sought:<br>Office held:                     |                                  |                               |
| Date  | Payee name<br>Brewer, Meredith   |  |                                  | Amount<br>(\$)                |
| 07/24/2008  | Payee address; City; State; Zip Code<br>734 Susie Ct<br>San Antonio, TX 78216      |  |                                  | \$747.58                      |
| Purpose of pay<br>required.)<br>Desc:Personnel                            | ment (See instructions regarding type of information                               | Complete if direct Candidate / Officehold          |                                  | fit Candidate/Officeholder ** |
| (li   | f travel outside of Texas, complete Schedule T)                                    | Office sought:<br>Office held:                     |                                  |                               |

| The Instruction                                | on Guide explains how to complete this form.          |   | 1 PAGE #<br>Schedule: 5/1          | 9 Report: 17/34                |
|--|---|---|------------------------------------|--------------------------------|
| 2 FILER NAME                                   | Texans for Joe Straus                                 |   | 3 ACCOUNT # 00056637               | (Ethics Commission filers)     |
| 4 Date   | 5 Payee name<br>Brewer, Meredith                      |   |                                    | 7 Amount (\$)                  |
| 08/07/2008                                     | 6 Payee address; City; State; Zip Code                |   |                                    | \$747.58                       |
|  | 734 Susie Ct<br>San Antonio, TX 78216                 |   |                                    |                                |
| 8 Purpose of pay required.)  Desc:Personnel    | /ment (See instructions regarding type of information | 9 · · Complete if direct<br>Candidate / Officehol |                                    | fit Candidate/Officeholder **  |
|  | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name<br>Brewer, Meredith                        |   |                                    | Amount<br>(\$)                 |
| 08/26/2008                                     | Payee address; City; State; Zip Code 734 Susie Ct     |   |                                    | \$747.58                       |
|  | San Antonio, TX 78216                                 |   |                                    |                                |
| Purpose of pay<br>required.)<br>Desc:Personnel | ment (See instructions regarding type of information  | Complete if direction Candidate / Officehol       | t expenditure to bene<br>der name: | efit Candidate/Officeholder ** |
|  | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name<br>Brewer, Meredith                        |   |                                    | Amount<br>(\$)                 |
| 09/09/2008                                     | Payee address; City; State; Zip Code 734 Susie Ct     |   |                                    | \$747.58                       |
|  | San Antonio, TX 78216                                 |   |                                    |                                |
| Purpose of pay<br>required.)<br>Desc:Personnel | ment (See instructions regarding type of information  | Candidate / Officehol                             |                                    | efit Candidate/Officeholder •• |
|  | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name  |   |                                    | Amount                         |
|  | Brewer, Meredith                                      |   |                                    | (\$)                           |
| 09/09/2008                                     | Payee address; City; State; Zip Code 734 Susie Ct     |   |                                    | \$95.94                        |
|  | San Antonio, TX 78216                                 |   |                                    |                                |
| required.)                                     | /ment (See instructions regarding type of information | ** Complete if direct Candidate / Officehol       |                                    | efit Candidate/Officeholder    |
| Desc:Mileage                                   |   | Office sought:                                    |                                    |                                |
| (li  | f travel outside of Texas, complete Schedule T) 🔲     | Office held:                                      |                                    |                                |

| The Instruction                            | ON GUIDE explains how to complete this form.                          |  | 1 PAGE #<br>Schedule: 6/1 | 9 Report: 18/34               |
|--|---|--|---------------------------|-------------------------------|
| 2 FILER NAME                               | Texans for Joe Straus   |  | 3 ACCOUNT # 00056637      | (Ethics Commission filers)    |
| 4 Date                                     | 5 Payee name<br>Brewer, Meredith                                      |  |                           | 7 Amount (\$)                 |
| 09/24/2008                                 | 6 Payee address; City; State; Zip Code                                |  |                           | \$747.58                      |
|  | 734 Susie Ct<br>San Antonio, TX 78216                                 |  |                           |                               |
| 8 Purpose of parrequired.)  Desc:Personnel | yment (See instructions regarding type of information                 | 9 · · Complete if direct<br>Candidate / Officehole |                           | fit Candidate/Officeholder ** |
|  | f travel outside of Texas, complete Schedule T)                       | Office sought:<br>Office held:                     |                           |                               |
| Date                                       | Payee name<br>Circuit City  |  |                           | Amount<br>(\$)                |
| 08/28/2008                                 | Payee address; City; State; Zip Code                                  |  |                           | \$65.93                       |
|  | 321 Northwest Loop 410<br>San Antonio, TX 78216                       |  |                           |                               |
| Purpose of pay                             | yment (See instructions regarding type of information                 | Complete if direct                                 |                           | efit Candidate/Officeholder   |
| Desc:Computer                              | Supplies  |  |                           |                               |
| (1   | f travel outside of Texas, complete Schedule T)                       | Office sought:<br>Office held:                     |                           |                               |
| Date                                       | Payee name<br>Crosswell, Jewel  |  |                           | Amount<br>(\$)                |
| 09/19/2008                                 | Payee address; City; State; Zip Code                                  |  |                           | \$500.00                      |
|  | 3115 Ella Lee Ln<br>Houston, TX 77019                                 |  |                           |                               |
| required.)                                 | yment (See instructions regarding type of information                 | Complete if direct                                 |                           | efit Candidate/Officeholder   |
|  | Check Canceled Event  | Office sought:                                     |                           |                               |
| (1   | f travel outside of Texas, complete Schedule T)                       | Office held:                                       |                           |                               |
| Date                                       | Payee name<br>Fitzsimons Jr., Hugh                                    |  |                           | Amount<br>(\$)                |
| 09/19/2008                                 | Payee address; City; State; Zip Code 2302 Mimosa Dr                   |  |                           | \$2,000.00                    |
|  | Houston, TX 77019   |  |                           |                               |
| required.)                                 | yment (See instructions regarding type of information                 | Complete if direct                                 |                           | efit Candidate/Officeholder   |
|  | Check Canceled Event  f travel outside of Texas, complete Schedule T) | Office sought: Office held:                        |                           |                               |
| (I   | i have outside of Texas, complete schedule 1)                         | Onice neid.  |                           |                               |

#### SCHEDULE F

1-800-325-8506

| The Instruction                              | ON GUIDE explains how to complete this form.  |   | 1 PAGE #<br>Schedule: 7/19 Report: 19/34 |                               |
|--|---|---|--|-------------------------------|
| 2 FILER NAME                                 | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637                     | (Ethics Commission filers)    |
| 4 Date                                       | 5 Payee name<br>Frederick's   | •   |  | 7 Amount (\$)                 |
| 09/19/2008                                   | 6 Payee address; City; State; Zip Code<br>7701 Broadway St<br>San Antonio, TX 78209 |   |  | \$64.06                       |
| 8 Purpose of pay required.)  Desc:Business M | /ment (See instructions regarding type of information                               | 9 · · Complete if direct<br>Candidate / Officehol |  | fit Candidate/Officeholder    |
| (II  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                    |  |                               |
| Date   | Payee name<br>GE Capital  |   |  | Amount<br>(\$)                |
| 08/01/2008                                   | Payee address; City; State; Zip Code P.O. Box 740423 Atlanta, GA 30374              |   |  | \$164.35                      |
| Purpose of pay<br>required.)<br>Desc:Copier  | /ment (See instructions regarding type of information                               | ** Complete if direct<br>Candidate / Officehol    |  | fit Candidate/Officeholder ** |
| (II  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                    |  |                               |
| Date   | Payee name<br>GE Capital  |   |  | Amount<br>(\$)                |
| 09/02/2008                                   | Payee address; City; State; Zip Code P.O. Box 740423 Atlanta, GA 30374              |   |  | \$140.87                      |
| Purpose of pay<br>required.)<br>Desc:Copier  | /ment (See instructions regarding type of information                               | ** Complete if direct<br>Candidate / Officehol    | t expenditure to bene<br>der name:       | fit Candidate/Officeholder ** |
| (II  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                    |  |                               |
| Date   | Payee name<br>GM Torrefazione Caffe   |   |  | Amount<br>(\$)                |
| 07/22/2008                                   | Payee address; City; State; Zip Code  |   |  | \$127.27                      |
| Purpose of pay                               | /ment (See instructions regarding type of information                               | · Complete if direct                              | t expenditure to bene                    | efit Candidate/Officeholder   |
| required.) Desc:Staff Gifts                  |   | Candidate / Officehol                             |  |                               |
| (II  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                    |  |                               |

| Payee address   City   State   2 p code  |                                    |   |   |                                  |                                |
|--|------------------------------------|---|---|----------------------------------|--------------------------------|
| 4 Date   5 Payee name   Greater San Antonio Chamber of Commerce   07/07/2008   6 Payee address:   City: State: Zip Code   \$230.00   8 Purpose of payment (See instructions regarding type of information required.) Desc:Membership   Office sought:   Office held:   Office held:  | The Instruction                    | ON GUIDE explains how to complete this form.          |   | _                                | 9 Report: 20/34                |
| Greater San Antonio Chamber of Commerce  07/07/2008  6 Payee address; City; State: Zip Code PO Box 1628 San Antonio, TX 78296  8 Purpose of payment (See instructions regarding type of information required.)  Date Payee name Internal Revenue Service  07/03/2008  Payee address: City; State: Zip Code 10/10/10/10/10/10/10/10/10/10/10/10/10/1  | 2 FILER NAME                       | Texans for Joe Straus                                 |   |                                  | (Ethics Commission filers)     |
| Section   Sect   | <b>4</b> Date                      | • •   |   |                                  |                                |
| Date Payee address; City: State: Zip Code required.)  Date Payee address; City: State: Zip Code for Exas, complete Schedule T)   Purpose of payment (See instructions regarding type of information required.)  Date Payee address; City: State: Zip Code for Exas, complete Schedule T)   Purpose of payment (See instructions regarding type of information required.)  Date Payee address; City: State: Zip Code (S)  Office sought: Office held:  Date Payee address; City: State: Zip Code (S)  Office sought: Office held:  Date Payee address; City: State: Zip Code (S)  Office sought: Office held:  Desc:Payroll Tax - Federal  Office Sought: Office developed for Information required.)  Date Payee name Internal Revenue Service (S)  Office Sought: Office held:  "Complete if direct expenditure to benefit Candidate/Officeholder required.)  Office Sought: Office held:  "Complete if direct expenditure to benefit Candidate/Officeholder required.)  Office Sought: Office held:  "Complete if direct expenditure to benefit Candidate/Officeholder required."  Office sought: Officeholder name:   | 07/07/2008                         | 6 Payee address; City; State; Zip Code<br>PO Box 1628 |   |                                  | \$230.00                       |
| Date Payee name Holmes, Ned (\$)  Purpose of payment (See instructions regarding type of information required.)  Date Payee address; City: State; Zip Code 1623 River Oaks Blvd Houston, TX 77019  Purpose of payment (See instructions regarding type of information (\$)  Date Payee name Internal Revenue Service (\$)  Ogden, UT 84201  Date Payee name Internal Revenue Service (\$)  Ogden, UT 84201  Date Payee address; City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Date Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Payee address: City: State; Zip Code (\$)  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Office sought: Officeholder name:  | required.)                         |   |   |                                  | fit Candidate/Officeholder **  |
| Holmes, Ned  (\$)  Payee address; City; State; Zip Code 1623 River Oaks Blvd Houston, TX 77019  Purpose of payment (See instructions regarding type of information required.)  Desc:Returned Check Canceled Event  (If travel outside of Texas, complete Schedule T)    Date Payee name Internal Revenue Service  Office held:  Purpose of payment (See instructions regarding type of information required.)  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought: Office held:  Office sought: Office held:  Office sought: Office held:  Office held:  Office sought: Office held:  Date Payee name Internal Revenue Service  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Date Payee address; City; State; Zip Code Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Purpose of payment (See instructions regarding type of information required.)  Office sought: Officeholder name:  Office sought: Officeholder name:  Office sought:  Office sought: Officeholder name:  | (I                                 | f travel outside of Texas, complete Schedule T)       | · ·   |                                  |                                |
| Purpose of payment (See instructions regarding type of information required.)  Date Payee name Internal Revenue Service Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Date Payee name Internal Revenue Service Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Date Payee address; City; State; Zip Code Ogden, UT 84201  Date Payee name Internal Revenue Service Office held:  **Complete if direct expenditure to benefit Candidate/Officeholder **Candidate / Office held:  **Office sought: Office held:  **Office held | Date                               | ,   |   |                                  |                                |
| Date Payee name Internal Revenue Service Office sought: Office sou | 09/19/2008                         | 1623 River Oaks Blvd                                  |   |                                  | \$500.00                       |
| Office sought: Office held:  Date  | required.)                         |   | Complete if direct Candidate / Officehold       | expenditure to bene<br>der name: | efit Candidate/Officeholder    |
| Date   Payee name   Internal Revenue Service   Payee address; City; State; Zip Code   Ogden, UT 84201   Office held:   Candidate / Office held:   Office held:   Office held:   Ogden, UT 84201   Office held:   Offic   | Desc:Returned Check Canceled Event |   |   |                                  |                                |
| Internal Revenue Service  O7/03/2008  Payee address; City; State; Zip Code Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought: Office held:  Office sought: Office held:  Payee name Internal Revenue Service  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information (\$)  Payee name Internal Revenue Service  Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Purpose of payment (See instructions regarding type of information required.)  Office sought: Office sought: Office held:  Office sought: Office held:  Office sought: Office held:  Office held:  Office sought: Office held:  | (I                                 | f travel outside of Texas, complete Schedule T)       |   |                                  |                                |
| Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  (If travel outside of Texas, complete Schedule T)   | Date                               | · · · · · · · · · · · · · · · · · · ·                 |   |                                  |                                |
| Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought: Office held:  Date Payee name Internal Revenue Service Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought: Office held:  **Complete if direct expenditure to benefit Candidate/Officeholder **Candidate / Office held:  **Office sought: Office held:  **Office held:  **Office held:  **Office held:  **Office held:  Ogden, UT 84201  **Office held:  **Office held:  **Office held:  **Office held:  Office held:  Office held:  **Office held:  **Office held:  Office held:  **Office held:  Office held:  **Office held:  Office held:  **Office held:  **Office held:  Office held:  **Office held:  Office held:  **Office held:  Office held:  **Office held:  **Off | 07/03/2008                         | Payee address; City; State; Zip Code                  |   |                                  | \$910.56                       |
| Candidate / Officeholder name:    Candidate / Officeholder name:   |                                    | Ogden, UT 84201                                       |   |                                  |                                |
| Office held:  Date Payee name Internal Revenue Service (\$)  Payee address; City; State; Zip Code Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office held:  Amount (\$)  Shall Code (\$)  Candidate / Office sought:   | required.)                         |   | ** Complete if direct<br>Candidate / Officehold | expenditure to bene<br>der name: | efit Candidate/Officeholder ** |
| Internal Revenue Service  O8/28/2008  Payee address; City; State; Zip Code Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought:  (\$)  **Complete if direct expenditure to benefit Candidate/Officeholder **Candidate / Office sought:   | (II                                | f travel outside of Texas, complete Schedule T)       |   |                                  |                                |
| Internal Revenue Service  O8/28/2008  Payee address; City; State; Zip Code Ogden, UT 84201  Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought:  (\$)  **Complete if direct expenditure to benefit Candidate/Officeholder **Candidate / Office sought:   | Date                               | Payee name  |   |                                  | Amount                         |
| Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought:  |                                    | Internal Revenue Service                              |   |                                  | (\$)                           |
| Purpose of payment (See instructions regarding type of information required.)  Desc:Payroll Tax - Federal  Office sought:  | 08/28/2008                         | Payee address; City; State; Zip Code                  |   |                                  | \$61.80                        |
| required.)  Desc:Payroll Tax - Federal  Office sought:   |                                    | Ogden, UT 84201                                       |   |                                  |                                |
| Office sought:   | required.)                         |   | ** Complete if direct<br>Candidate / Officehold | expenditure to bene<br>der name: | efit Candidate/Officeholder •• |
| <u>L</u>   | -                                  | <u></u>   |   |                                  |                                |

| The Instruction                           | on Guide explains how to complete this form.          |   | 1 PAGE #<br>Schedule: 9/1          | 9 Report: 21/34                |
|---|---|---|------------------------------------|--------------------------------|
| 2 FILER NAME                              | Texans for Joe Straus                                 |   | 3 ACCOUNT # 00056637               | (Ethics Commission filers)     |
| 4 Date                                    | 5 Payee name<br>Internal Revenue Service              |   |                                    | 7 Amount (\$)                  |
| 08/28/2008                                | 6 Payee address; City; State; Zip Code                |   |                                    | \$23.71                        |
|   | Ogden, UT 84201                                       |   |                                    |                                |
| 8 Purpose of pay required.) Desc:1120 POL | ment (See instructions regarding type of information  | 9 · · Complete if direct<br>Candidate / Officehol |                                    | efit Candidate/Officeholder •• |
| (It                                       | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date                                      | Payee name<br>Invitations Etc.                        |   |                                    | Amount<br>(\$)                 |
| 09/20/2008                                | Payee address; City; State; Zip Code                  |   |                                    | \$107.85                       |
|   | 6434 North New Braunfels<br>San Antono, TX 78209      |   |                                    |                                |
| required.)                                | /ment (See instructions regarding type of information | Complete if direct Candidate / Officehol          | t expenditure to bene<br>der name: | fit Candidate/Officeholder **  |
| Desc:Office Sup                           | plies   |   |                                    |                                |
| (11                                       | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date                                      | Payee name<br>Jewett, Jill                            |   |                                    | Amount<br>(\$)                 |
| 09/18/2008                                | Payee address; City; State; Zip Code                  |   |                                    | \$250.00                       |
|   | 3108 Ella Lee Lane<br>Houston, TX 77019               |   |                                    |                                |
| required.)                                | /ment (See instructions regarding type of information | Complete if direct                                | t expenditure to bene<br>der name: | fit Candidate/Officeholder ••  |
| Desc:Returned 0                           | Check Canceled Event                                  | 0"  |                                    |                                |
| (It                                       | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |
| Date                                      | Payee name<br>Jim's Restaurants                       |   |                                    | Amount<br>(\$)                 |
| 07/01/2008                                | Payee address; City; State; Zip Code                  |   |                                    | \$16.18                        |
|   | 8427 Broadway St<br>San Antonio, TX 78209             |   |                                    |                                |
| required.)                                | /ment (See instructions regarding type of information | Complete if direct Candidate / Officehol          |                                    | efit Candidate/Officeholder    |
| Desc:Business N                           | /leeting  | 000   |                                    |                                |
| (li                                       | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                                    |                                |

| The Instruction                                | on Guide explains how to complete this form.  |   | 1 PAGE #<br>Schedule: 10/          | 19 Report: 22/34                |
|--|---|---|------------------------------------|---------------------------------|
| 2 FILER NAME                                   | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637               | (Ethics Commission filers)      |
| 4 Date   | 5 Payee name<br>Jim's Restaurants   |   |                                    | 7 Amount (\$)                   |
| 08/14/2008                                     | <b>6</b> Payee address; City; State; Zip Code                                       |   |                                    | \$40.73                         |
|  | 8427 Broadway St<br>San Antonio, TX 78209   |   |                                    |                                 |
| 8 Purpose of pay required.)  Desc:Business M   | ment (See instructions regarding type of information                                | 9 ** Complete if direct Candidate / Officehol |                                    | efit Candidate/Officeholder **  |
|  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                |                                    |                                 |
| Date   | Payee name<br>Jim's Restaurants   |   |                                    | Amount<br>(\$)                  |
| 09/11/2008                                     | Payee address; City; State; Zip Code  |   |                                    | \$19.33                         |
|  | 8427 Broadway St<br>San Antonio, TX 78209   |   |                                    |                                 |
| required.)                                     | ment (See instructions regarding type of information                                | Complete if direct Candidate / Officehol      | t expenditure to bene<br>der name: | efit Candidate/Officeholder **  |
| Desc:Business Meeting                          |   |   |                                    |                                 |
| (ii  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                |                                    |                                 |
| Date   | Payee name<br>Kaden, Ashley   |   |                                    | Amount<br>(\$)                  |
| 07/03/2008                                     | Payee address; City; State; Zip Code 2200 Panther Trail #514                        |   |                                    | \$200.00                        |
|  | Austin, TX 78704  |   |                                    |                                 |
| Purpose of pay<br>required.)<br>Desc:Personnel | ment (See instructions regarding type of information                                | Complete if direct Candidate / Officehol      |                                    | efit Candidate/Officeholder **  |
|  | f travel outside of Texas, complete Schedule T)                                     | Office sought: Office held:                   |                                    |                                 |
| `  | . ,   |   |                                    | Amount                          |
| Date   | Payee name<br>Kaden, Ashley   |   |                                    | Amount<br>(\$)                  |
| 08/05/2008                                     | Payee address; City; State; Zip Code<br>2200 Panther Trail #514<br>Austin, TX 78704 |   |                                    | \$200.00                        |
| required.)                                     | ment (See instructions regarding type of information                                | Candidate / Officehol                         |                                    | I<br>fit Candidate/Officeholder |
| Desc:Personnel                                 |   |   |                                    |                                 |
| (li  | f travel outside of Texas, complete Schedule T)                                     | Office sought:<br>Office held:                |                                    |                                 |

#### SCHEDULE F

1-800-325-8506

| The Instruction                                | on Guide explains how to complete this form.                 |  | 1 PAGE #<br>Schedule: 11/          | 19 Report: 23/34                |
|--|--|--|------------------------------------|---------------------------------|
| 2 FILER NAME                                   | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637               | (Ethics Commission filers)      |
| 4 Date   | 5 Payee name<br>Kaden, Ashley                                |  |                                    | 7 Amount (\$)                   |
| 08/28/2008                                     | 6 Payee address; City; State; Zip Code                       |  |                                    | \$23.43                         |
|  | 2200 Panther Trail #514<br>Austin, TX 78704                  |  |                                    |                                 |
| 8 Purpose of pay required.) Desc:Gift          | /ment (See instructions regarding type of information        | 9 · · Complete if direct Candidate / Officehol |                                    | fit Candidate/Officeholder **   |
|  | f travel outside of Texas, complete Schedule T)              | Office sought:<br>Office held:                 |                                    |                                 |
| Date   | Payee name<br>Kaden, Ashley                                  |  |                                    | Amount<br>(\$)                  |
| 09/02/2008                                     | Payee address; City; State; Zip Code                         |  |                                    | \$200.00                        |
|  | 2200 Panther Trail #514<br>Austin, TX 78704                  |  |                                    |                                 |
| Purpose of pay<br>required.)<br>Desc:Personnel | ment (See instructions regarding type of information         | Complete if direct Candidate / Officehol       | t expenditure to bene<br>der name: | efit Candidate/Officeholder **  |
|  | f travel outside of Texas, complete Schedule T)              | Office sought:<br>Office held:                 |                                    |                                 |
| Date   | Payee name<br>Kaden, Ashley                                  |  |                                    | Amount<br>(\$)                  |
| 09/24/2008                                     | Payee address; City; State; Zip Code 2200 Panther Trail #514 |  |                                    | \$87.17                         |
|  | Austin, TX 78704   |  |                                    |                                 |
| Purpose of pay<br>required.)<br>Desc:Mileage   | ment (See instructions regarding type of information         | ** Complete if direct Candidate / Officehol    | t expenditure to bene<br>der name: | efit Candidate/Officeholder **  |
| _  | f travel outside of Texas, complete Schedule T)              | Office sought:<br>Office held:                 |                                    |                                 |
| Date   | Payee name<br>King Ranch PAC                                 |  |                                    | Amount<br>(\$)                  |
| 09/19/2008                                     | Payee address; City; State; Zip Code                         |  |                                    | \$1,000.00                      |
|  | 3 Riverway Suite 1600<br>Houston, TX 77056                   |  |                                    |                                 |
| required.)                                     | ment (See instructions regarding type of information         | ** Complete if direc<br>Candidate / Officehol  |                                    | <br>efit Candidate/Officeholder |
| Desc:Returned (                                | Check Canceled Event   | 0.00   |                                    |                                 |
| (l   | f travel outside of Texas, complete Schedule T)              | Office sought:<br>Office held:                 |                                    |                                 |

| The Instruction           | ON GUIDE explains how to complete this form.          |   | 1 PAGE #<br>Schedule: 12/ | 19 Report: 24/34               |
|---------------------------|---|---|---------------------------|--------------------------------|
| 2 FILER NAME              | Texans for Joe Straus                                 |   | 3 ACCOUNT # 00056637      | (Ethics Commission filers)     |
| 4 Date                    | 5 Payee name<br>Lahourcade, Lee                       |   |                           | 7 Amount (\$)                  |
| 09/19/2008                | <b>6</b> Payee address; City; State; Zip Code         |   |                           | \$1,000.00                     |
|                           | 5539 Cranbrook Rd.<br>Houston, TX 77056               |   |                           |                                |
| required.)                | ment (See instructions regarding type of information  | 9 ** Complete if direct<br>Candidate / Officehold |                           | efit Candidate/Officeholder •• |
| Desc:Returned (           | Check Canceled Event                                  | Office sought:                                    |                           |                                |
| (I                        | f travel outside of Texas, complete Schedule T)       | Office held:                                      |                           |                                |
| Date                      | Payee name<br>Levy, Janis                             |   |                           | Amount<br>(\$)                 |
| 09/19/2008                | Payee address; City; State; Zip Code                  |   |                           | \$250.00                       |
|                           | 3200 Alabama Court<br>Houston, TX 77027               |   |                           |                                |
| Purpose of pay required.) | /ment (See instructions regarding type of information | Complete if direct                                |                           | fit Candidate/Officeholder ••  |
| Desc:Returned (           | Check Canceled Event                                  |   |                           |                                |
| (I                        | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                           |                                |
| Date                      | Payee name<br>Lilly & Company LLC                     |   |                           | Amount<br>(\$)                 |
| 07/24/2008                | Payee address; City; State; Zip Code                  |   |                           | \$2,500.00                     |
|                           | 1005 Congress Avenue<br>Suite 910<br>Austin, TX 78701 |   |                           |                                |
| required.)                | /ment (See instructions regarding type of information | Candidate / Officehold                            |                           | fit Candidate/Officeholder **  |
| Desc:Consultant           |   | Office sought:                                    |                           |                                |
| (I                        | f travel outside of Texas, complete Schedule T)       | Office held:                                      |                           |                                |
| Date                      | Payee name<br>Lilly & Company LLC                     |   |                           | Amount<br>(\$)                 |
| 08/25/2008                | Payee address; City; State; Zip Code                  |   |                           | \$2,500.00                     |
|                           | 1005 Congress Avenue<br>Suite 910<br>Austin, TX 78701 |   |                           |                                |
| required.)                | /ment (See instructions regarding type of information | Candidate / Officehold                            |                           | fit Candidate/Officeholder ••  |
| Desc:Consultant           |   |   |                           |                                |
| (I                        | f travel outside of Texas, complete Schedule T)       | Office sought:<br>Office held:                    |                           |                                |

| The Instruction                                   | ON GUIDE explains how to complete this form.   |  | 1 PAGE #<br>Schedule: 13/ | 19 Report: 25/34               |
|---|--|--|---------------------------|--------------------------------|
| 2 FILER NAME                                      | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637      | (Ethics Commission filers)     |
| 4 Date  | 5 Payee name<br>Lilly & Company LLC  |  |                           | 7 Amount (\$)                  |
| 09/18/2008  | 6 Payee address; City; State; Zip Code 1005 Congress Avenue Suite 910 Austin, TX 78701 |  |                           | \$2,500.00                     |
| 8 Purpose of pay required.)  Desc:Consultant      | yment (See instructions regarding type of information                                  | 9 · Complete if direct<br>Candidate / Officehold |                           | fit Candidate/Officeholder ••• |
|   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                   |                           |                                |
| Date  | Payee name<br>Lyle Larson Campaign   |  |                           | Amount<br>(\$)                 |
| 07/02/2008  | Payee address; City; State; Zip Code PO Box 700647 San Antonio, TX 78270               |  |                           | \$125.00                       |
| Purpose of pay<br>required.)<br>Desc:Contribution | yment (See instructions regarding type of information                                  | ** Complete if direct<br>Candidate / Officehold  |                           | fit Candidate/Officeholder **  |
| (I  | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                   |                           |                                |
| Date  | Payee name<br>Medina, Rebecca  |  |                           | Amount<br>(\$)                 |
| 07/02/2008  | Payee address; City; State; Zip Code<br>9318 Village Lance<br>San Antonio, TX 78250    |  |                           | \$405.00                       |
| Purpose of pay required.)  Desc:Accounting        | yment (See instructions regarding type of information                                  | ** Complete if direct<br>Candidate / Officehold  |                           | fit Candidate/Officeholder ••  |
|   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                   |                           |                                |
| Date  | Payee name   |  |                           | Amount                         |
|   | Medina, Rebecca  |  |                           | (\$)                           |
| 08/28/2008  | Payee address; City; State; Zip Code<br>9318 Village Lance<br>San Antonio, TX 78250    |  |                           | \$101.25                       |
| required.)  | yment (See instructions regarding type of information                                  | ** Complete if direct<br>Candidate / Officehold  |                           | fit Candidate/Officeholder ••  |
| Desc:Accounting                                   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                   |                           |                                |
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| The Instruction                                  | ON GUIDE explains how to complete this form.                                     |  | 1 PAGE #<br>Schedule: 14/        | 19 Report: 26/34                |
|--|--|--|----------------------------------|---------------------------------|
| 2 FILER NAME                                     | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637             | (Ethics Commission filers)      |
| 4 Date   | 5 Payee name<br>MerriMade  | •  |                                  | 7 Amount (\$)                   |
| 08/28/2008                                       | 6 Payee address; City; State; Zip Code PO Box 207 Peru, IN 46970                 |  |                                  | \$144.00                        |
| 8 Purpose of pay required.) Desc:Printing        | yment (See instructions regarding type of information                            | 9 · · Complete if direct<br>Candidate / Officehold | expenditure to bene<br>der name: | fit Candidate/Officeholder **   |
| (II  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                     |                                  |                                 |
| Date   | Payee name<br>Mr. Dan Vogler   |  |                                  | Amount<br>(\$)                  |
| 09/17/2008                                       | Payee address; City; State; Zip Code<br>16310 Puma Pass<br>San Antonio, TX 78247 |  |                                  | \$150.00                        |
| Purpose of pay<br>required.)<br>Desc:IT Support  | yment (See instructions regarding type of information                            | ** Complete if direct<br>Candidate / Officehold    |                                  | fit Candidate/Officeholder **   |
| (II  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                     |                                  |                                 |
| Date   | Payee name<br>Ms. Susan Riley  |  |                                  | Amount<br>(\$)                  |
| 08/01/2008                                       | Payee address; City; State; Zip Code 124 Alta Ave San Antonio, TX 78209          |  |                                  | \$285.00                        |
| Purpose of pay<br>required.)<br>Desc:Photograpl  | yment (See instructions regarding type of information                            | Complete if direct Candidate / Officehold          | expenditure to bene<br>der name: | fit Candidate/Officeholder ••   |
|  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                     |                                  |                                 |
| Date   | Payee name<br>Pancake Pantry   |  |                                  | Amount<br>(\$)                  |
| 07/15/2008                                       | Payee address; City; State; Zip Code 1796 21st Ave S Nashville, TN 37212         |  |                                  | \$75.00                         |
| Purpose of pay<br>required.)<br>Desc:Intern Gift | yment (See instructions regarding type of information                            | ** Complete if direct<br>Candidate / Officehold    |                                  | fit Candidate/Officeholder **   |
|  | f travel outside of Texas, complete Schedule T)                                  | Office sought:<br>Office held:                     |                                  | Electronic Filing Version 2.2.6 |

| The Instruction                                   | ON GUIDE explains how to complete this form.  |   | 1 PAGE #<br>Schedule: 15/ | 19 Report: 27/34               |
|---|---|---|---------------------------|--------------------------------|
| 2 FILER NAME                                      | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637      | (Ethics Commission filers)     |
| 4 Date  | 5 Payee name<br>Rape Crisis Center  |   |                           | 7 Amount (\$)                  |
| 09/11/2008  | 6 Payee address; City; State; Zip Code<br>7500 W US Highway 90 Bldg 2<br>Suite 201<br>San Antonio, TX 78227 |   |                           | \$250.00                       |
| 8 Purpose of pay required.)  Desc:Event Spor      | /ment (See instructions regarding type of information   | 9 ** Complete if direct<br>Candidate / Officehold |                           | fit Candidate/Officeholder **  |
| -   | f travel outside of Texas, complete Schedule T)   | Office sought:<br>Office held:                    |                           |                                |
| Date  | Payee name<br>San Antonio Express News  |   |                           | Amount<br>(\$)                 |
| 08/22/2008  | Payee address; City; State; Zip Code PO Box 2171 San Antonio, TX 78297                                      |   |                           | \$223.60                       |
| Purpose of pay<br>required.)<br>Desc:Subscription | /ment (See instructions regarding type of information   | Complete if direct Candidate / Officehole         |                           | ffit Candidate/Officeholder ** |
| -   | f travel outside of Texas, complete Schedule T)   | Office sought:<br>Office held:                    |                           |                                |
| Date  | Payee name<br>Steen, Lias J.  |   |                           | Amount<br>(\$)                 |
| 09/19/2008  | Payee address; City; State; Zip Code 5621 Willers Way Houston, TX 77056                                     |   |                           | \$250.00                       |
| required.)  | /ment (See instructions regarding type of information Check Canceled Event                                  | ** Complete if direct<br>Candidate / Officehold   |                           | fit Candidate/Officeholder **  |
| (ir   | f travel outside of Texas, complete Schedule T)   | Office sought:<br>Office held:                    |                           |                                |
| Date  | Payee name<br>Sterling Printing and Copy  |   |                           | Amount<br>(\$)                 |
| 09/11/2008  | Payee address; City; State; Zip Code<br>435 Sterzing St<br>Austin, TX 78704                                 |   |                           | \$159.43                       |
| Purpose of pay<br>required.)<br>Desc:Printing     | ment (See instructions regarding type of information  | Complete if direct Candidate / Officehold         |                           | efit Candidate/Officeholder •• |
| (II   | f travel outside of Texas, complete Schedule T)   | Office sought:<br>Office held:                    |                           |                                |

| The Instruction                                 | on Guide explains how to complete this form.   |  | 1 PAGE #<br>Schedule: 16/          | 19 Report: 28/34               |
|---|--|--|------------------------------------|--------------------------------|
| 2 FILER NAME                                    | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637               | (Ethics Commission filers)     |
| 4 Date  | 5 Payee name<br>Texas House of Representatives   |  |                                    | 7 Amount (\$)                  |
| 08/20/2008                                      | 6 Payee address; City; State; Zip Code PO Box 2910 Austin, TX 78768                          |  |                                    | \$85.00                        |
|   | Additi, 17/10/00   |  |                                    |                                |
| 8 Purpose of pay required.)  Desc:Austin Office | ment (See instructions regarding type of information ce Supplies                             | 9 · · Complete if direct Candidate / Officehol |                                    | efit Candidate/Officeholder •• |
| (It   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date  | Payee name<br>The Enchanted Florist  |  |                                    | Amount<br>(\$)                 |
| 09/16/2008                                      | Payee address; City; State; Zip Code<br>1616 Lavaca St<br>Austin, TX 78701                   |  |                                    | \$75.78                        |
| Purpose of pay<br>required.)<br>Desc:Staff Gift | /ment (See instructions regarding type of information  | Complete if direct Candidate / Officehol       | t expenditure to bene<br>der name: | fit Candidate/Officeholder ••  |
|   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date  | Payee name<br>TW Enterprises   |  |                                    | Amount<br>(\$)                 |
| 09/10/2008                                      | Payee address; City; State; Zip Code<br>2810 Thousand Oaks Dr # 215<br>San Antonio, TX 78232 |  |                                    | \$36.05                        |
| Purpose of pay<br>required.)<br>Desc:IT Support | /ment (See instructions regarding type of information  | ** Complete if direct Candidate / Officehol    |                                    | efit Candidate/Officeholder    |
|   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date  | Payee name<br>TW Enterprises   |  |                                    | Amount<br>(\$)                 |
| 09/13/2008                                      | Payee address; City; State; Zip Code<br>2810 Thousand Oaks Dr # 215<br>San Antonio, TX 78232 |  |                                    | \$270.31                       |
| Purpose of pay<br>required.)<br>Desc:IT Support | /ment (See instructions regarding type of information  | ** Complete if direct<br>Candidate / Officehol |                                    | fit Candidate/Officeholder ••  |
|   | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |

| The Instruction                              | ON GUIDE explains how to complete this form.                              |   | 1 PAGE #<br>Schedule: 17/          | 19 Report: 29/34               |
|--|---|---|------------------------------------|--------------------------------|
| 2 FILER NAME                                 | Texans for Joe Straus   |   | 3 ACCOUNT # 00056637               | (Ethics Commission filers)     |
| 4 Date                                       | 5 Payee name<br>U.S. Post Office  | •   |                                    | 7 Amount (\$)                  |
| 08/21/2008                                   | 6 Payee address; City; State; Zip Code                                    |   |                                    | \$30.24                        |
|  | 5500 Broadway<br>San Antonio, TX 78209                                    |   |                                    |                                |
| 8 Purpose of pay required.) Desc:Postage     | /ment (See instructions regarding type of information                     | 9 · · Complete if direct<br>Candidate / Officehol |                                    | fit Candidate/Officeholder **  |
| _  | f travel outside of Texas, complete Schedule T)                           | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name<br>U.S. Post Office  |   |                                    | Amount<br>(\$)                 |
| 09/09/2008                                   | Payee address; City; State; Zip Code                                      |   |                                    | \$43.68                        |
|  | 5500 Broadway<br>San Antonio, TX 78209                                    |   |                                    |                                |
| Purpose of pay<br>required.)<br>Desc:Postage | ment (See instructions regarding type of information                      | ** Complete if direct<br>Candidate / Officehol    | t expenditure to bene<br>der name: | efit Candidate/Officeholder •• |
| _  | f travel outside of Texas, complete Schedule T)                           | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name<br>U.S. Post Office  |   |                                    | Amount<br>(\$)                 |
| 09/11/2008                                   | Payee address; City; State; Zip Code                                      |   |                                    | \$528.05                       |
|  | 5500 Broadway<br>San Antonio, TX 78209                                    |   |                                    |                                |
| Purpose of pay<br>required.)<br>Desc:Postage | ment (See instructions regarding type of information                      | ** Complete if direct<br>Candidate / Officehol    |                                    | efit Candidate/Officeholder ** |
| _  | f travel outside of Texas, complete Schedule T)                           | Office sought:<br>Office held:                    |                                    |                                |
| Date   | Payee name  |   |                                    | Amount                         |
|  | Verizon Wireless  |   |                                    | (\$)                           |
| 07/24/2008                                   | Payee address; City; State; Zip Code<br>PO Box 660108<br>Dallas, TX 75266 |   |                                    | \$45.00                        |
| Purpose of pay required.)  Desc:Utilities    | ment (See instructions regarding type of information                      | ** Complete if direct Candidate / Officehol       |                                    | efit Candidate/Officeholder    |
|  | f travel outside of Texas, complete Schedule T)                           | Office sought:<br>Office held:                    |                                    |                                |

| The Instruction                                  | on Guide explains how to complete this form.   |  | 1 PAGE #<br>Schedule: 18/          | 19 Report: 30/34               |
|--|--|--|------------------------------------|--------------------------------|
| 2 FILER NAME                                     | Texans for Joe Straus  |  | 3 ACCOUNT # 00056637               | (Ethics Commission filers)     |
| 4 Date   | 5 Payee name<br>Verizon Wireless   |  |                                    | 7 Amount (\$)                  |
| 09/11/2008                                       | 6 Payee address; City; State; Zip Code<br>PO Box 660108<br>Dallas, TX 75266            |  |                                    | \$45.00                        |
| 8 Purpose of pay required.) Desc:Utilities       | /ment (See instructions regarding type of information                                  | Candidate / Officehol                          |                                    | ffit Candidate/Officeholder ** |
| (II  | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date   | Payee name<br>Verizon Wireless   |  |                                    | Amount<br>(\$)                 |
| 09/17/2008                                       | Payee address; City; State; Zip Code PO Box 660108 Dallas, TX 75266                    |  |                                    | \$45.00                        |
| Purpose of pay<br>required.)<br>Desc:Utilities   | ment (See instructions regarding type of information                                   | ** Complete if direct<br>Candidate / Officehol | t expenditure to bene<br>der name: | efit Candidate/Officeholder ** |
| (II  | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date   | Payee name<br>XO Communications  |  |                                    | Amount<br>(\$)                 |
| 07/02/2008                                       | Payee address; City; State; Zip Code<br>1030 Central Pkwy So.<br>San Antonio, TX 78232 |  |                                    | \$97.09                        |
| Purpose of pay<br>required.)<br>Desc:Internet Se | /ment (See instructions regarding type of information                                  | Complete if direct Candidate / Officehol       |                                    | fit Candidate/Officeholder **  |
|  | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |
| Date   | Payee name<br>XO Communications  |  |                                    | Amount<br>(\$)                 |
| 08/04/2008                                       | Payee address; City; State; Zip Code<br>1030 Central Pkwy So.<br>San Antonio, TX 78232 |  |                                    | \$97.09                        |
| Purpose of pay<br>required.)<br>Desc:Internet Se | ment (See instructions regarding type of information                                   | ** Complete if direct Candidate / Officehol    |                                    | efit Candidate/Officeholder •• |
|  | f travel outside of Texas, complete Schedule T)  | Office sought:<br>Office held:                 |                                    |                                |

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| The Instruction Guide explains how to complete this form.                                      | 1 PAGE #<br>Schedule: 19/19 Report: 31/34   |
|--|---|
| 2 FILER NAME Texans for Joe Straus   | 3 ACCOUNT # (Ethics Commission filers) 00056637   |
| 4 Date 5 Payee name XO Communications  | 7 Amount (\$)   |
| 09/02/2008  6 Payee address; City; State; Zip Code 1030 Central Pkwy So. San Antonio, TX 78232 |   |
| Purpose of payment (See instructions regarding type of information required.)                  | 9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: |
| Desc:Internet Service  (If travel outside of Texas, complete Schedule T)                       | Office sought: Office held:   |
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# **CREDITS (optional)**

#### SCHEDULE K

| The Instructi | ON GUIDE explains how to complete this form.                         | 1 PAGE #<br>Schedule: 1/3 | Report: 32/34              |
|---------------|--|---------------------------|----------------------------|
| 2 FILER NAME  | Texans for Joe Straus  | 3 ACCOUNT # 00056637      | (Ethics Commission filers) |
| 4 Date        | 5 Payor name AIM Investment Services                                 |                           | 8 Amount (\$)              |
| 07/12/2008    | 6 Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210 |                           | \$238.3                    |
|               | 7 Reason for credit  |                           |                            |
| Date          | Payor name AIM Investment Services                                   |                           | Amount (\$)                |
| 07/24/2008    | Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210   |                           | \$230.14                   |
|               | Reason for credit  |                           |                            |
| Date          | Payor name AIM Investment Services                                   |                           | Amount (\$)                |
| 07/31/2008    | Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210   |                           | \$254.2                    |
|               | Reason for credit  |                           |                            |
| Date          | Payor name AIM Investment Services                                   |                           | Amount (\$)                |
| 08/12/2008    | Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210   |                           | \$246.3                    |
|               | Reason for credit  |                           |                            |
| Date          | Payor name AIM Investment Services                                   |                           | Amount (\$)                |
| 08/24/2008    | Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210   |                           | \$237.8                    |
|               |  |                           |                            |

# **CREDITS (optional)**

#### SCHEDULE K

1-800-325-8506

| The Instruction | ON GUIDE explains how to complete this form.                             | 1 PAGE #<br>Schedule: 2/3 | Report: 33/34              |
|-----------------|--|---------------------------|----------------------------|
| FILER NAME      | Texans for Joe Straus  | 3 ACCOUNT # 00056637      | (Ethics Commission filers) |
| Date            | 5 Payor name<br>AIM Investment Services                                  | •                         | 8 Amount (\$)              |
| 08/31/2008      | 6 Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210     |                           | \$256.9                    |
|                 | 7 Reason for credit  |                           |                            |
| Date            | Payor name AIM Investment Services                                       |                           | Amount (\$)                |
| 09/12/2008      | Payor address; City; State; Zip Code<br>PO Box 4739<br>Houston, TX 77210 |                           | \$246.30                   |
|                 | Reason for credit  |                           |                            |
| Date            | Payor name<br>AIM Investment Services                                    |                           | Amount (\$)                |
| 09/12/2008      | Payor address; City; State; Zip Code<br>PO Box 4739<br>Houston, TX 77210 |                           | \$698.0                    |
|                 | Reason for credit  |                           |                            |
| Date            | Payor name AIM Investment Services                                       |                           | Amount (\$)                |
| 09/18/2008      | Payor address; City; State; Zip Code PO Box 4739 Houston, TX 77210       |                           | \$705.79                   |
|                 | Reason for credit  |                           |                            |
| Date            | Payor name AIM Investment Services                                       |                           | Amount (\$)                |
| 09/24/2008      | Payor address; City; State; Zip Code<br>PO Box 4739<br>Houston, TX 77210 |                           | \$237.8                    |
|                 |  |                           | Ī.                         |

# **CREDITS (optional)**

#### SCHEDULE K

| The Instructi     | ON GUIDE explains how to complete this form.   | 1 PAGE #<br>Schedule: 3/3 | Report: 34/34             |        |
|-------------------|--|---------------------------|---------------------------|--------|
| 2 FILER NAME      | Texans for Joe Straus  | 3 ACCOUNT# 00056637       | (Ethics Commission filers | ;)     |
| 4 Date 07/31/2008 | <ul> <li>5 Payor name     Frost Bank</li> <li>6 Payor address; City; State; Zip Code     PO Box 1600     San Antonio, TX 78296</li> <li>7 Reason for credit</li> </ul> |                           | 8 Amount (\$)             | \$6.10 |
| Date              | Payor name<br>Frost Bank   |                           | Amount (\$)               |        |
| 08/31/2008        | Payor address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296  Reason for credit  |                           |                           | \$4.60 |