Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received: 07 APR 12 RECEIVED

Date Hand-delivered or Date Postmarked: 4:50 CSO

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: DR. | FIRST: ROBERT | MI: N.

NICKNAME: BOB | LAST: CLUCK | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

5820 BAY CLUB DR.
ARLINGTON, TX 76013

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (817) | PHONE NUMBER: 265-6777 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR (circled) | FIRST: BAILEY | MI:

NICKNAME | LAST: RUFF | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

4102 SHADY VALLEY DR.
ARL., TX 76013

8 CAMPAIGN TREASURER PHONE

AREA CODE: ( ) | PHONE NUMBER | EXTENSION

9 REPORT TYPE

☐ January 15 ☑ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 1/16/07 THROUGH Month Day Year: 4/12/07

11 ELECTION

ELECTION DATE Month Day Year: 5/12/07

ELECTION TYPE: ☐ Primary ☐ Runoff ☑ General ☐ Special

12 OFFICE

OFFICE HELD (if any): MA
CITY OF ARLINGTON

13 OFFICE SOUGHT (if known): Mayor

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

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

Name

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

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 47,985.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0
4.	**TOTAL POLITICAL EXPENDITURES**	$ 18,720.98

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 86,631.57

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 9,460.07

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
KAREN WILLIAMS
Notary Public
STATE OF TEXAS
My Comm. Exp. 12/31/2007

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Robert N. Cluck, this the 12th day of April, 20 07, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Karen Williams	Karen Williams	Notary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME DR. ROBERT N. CLUCK

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/2/07	G.C. MARTIN P.O. Box 91588 ARLINGTON, TX 76015	$1,000.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/2/07	MICHAEL H. PATTERSON 1111 W. ARKANSAS LN., STE. B ARL., TX 76013	$1,000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/3/07	MICHAEL & MARTHA REISWIG 2712 MARK TWAIN CT. ARLINGTON, TX 76006	$1,000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/6/07	GREG + PAM KENT 1304 CROWNHILL CT. ARL., TX 76012	$2,500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/7/07	WILEY + JENNIFER CURTIS 3340 THORNTREE CT. ARL., TX 76016	$200.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/7/07	BAILEY H. RUFF 4102 SHADY VALLEY DR. ARL., TX 76013	$500.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/7/07	BILLIE FARRAR 1731 WOODS DR. ARL., TX 76010	$1,000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/7/07	KELLY McKNIGHT 3209 W SUBLETT RD. ARL., TX 76017	$1,000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/9/07	BEN & MARY FRANCES DOSKOCIL 5306 MANSFIELD RD. ARL., TX 76017	$1,000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/9/07	JERRY & VALERIA DODSON 5900 ROSEMONT CT. ARL., TX 76017	$500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/10/07	WILLIAM + PEGGY POYNTER 2307 CASTLE ROCK RD. ARL., TX 76006	$500.00	

9 Principal occupation / Job title (See Instructions): REAL ESTATE

10 Employer (See Instructions): POYNTER SCIFRES CO.

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/10/07	WALID JOULANI 2900 RUSH CT. ARL., TX 76017	$250.00	

Principal occupation / Job title (See Instructions): AUTO DEALER

Employer (See Instructions): DFW AUTO RANCH

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/11/07	MICHAEL + CAROL MENDELSON 2107 CROSS CREEK CT. ARL., TX 76017	$250.00	

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/12/07	WENDELL + BETTY NEDDERMAN 6200 TIFFANY OAKS LN. ARL., TX 76016	$100.00	

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/12/07	DAVID MORITZ 2111 N. COLLINS, STE. 323 ARL., TX 76011	$5,000.00	

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/12/07	FRED OR LYNDA WEEKLEY 1821 MOSSY OAK ARL., TX 76012	$100.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
LAWYER	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/12/07	JAN REITER + LEONARD REITER 414 BEADY RD. ARL., TX 76006	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/13/07	CAROLYN + DON CASSELBERRY 702 FINDLAY DR. ARL., TX 76012	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
REALTOR	HOLLIDAY

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/13/07	ROGER + JANIS DEFRANG 2200 SHADY VIEW CT. ARL., TX 76013	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SALES	DICKINSON

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/13/07	ROBERT R. BRACKEEN 2225 E. RANDOL MILL RD #223 TX 76011	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CPA	SELF

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/13/07	ROBERT + TILLIE BURGIN 2314 PERRYLAND ARL., TX 76013	$100.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions): MISSION ARL.

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/9/07	KAREN + JEFF WILLIAMS 6948 W POLLY WEBB RD. ARLINGTON, TX 76016	$1,000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/12/07	B.J. HALL 6312 CALENDAR RD. ARL., TX 76001	$250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/12/07	TEARETHA CROXTON 2102 REFLECTION BAY DR. ARLINGTON, TX 76013	$200.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/14/07	JOSEPH C. MERRILL 4 COUNTRY CLUB CT. ARL., TX 76013	$100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3/14/07	JIMMY G. PHILLIPS 415 JOYCE ST. ARL., TX 76010	$250.00			
3/15/07	SUE PHILLIPS 415 JOYCE ST. ARL., TX 76010	$250.00			
3/15/07	MIKE & AMY WADE 4140 W. PIONEER PKWY ARL., TX 76013	$500.00			WADE FAMILY FUNERAL HOME
3/15/07	WAYNE HILL & DR MOLLY HANSEN 1513 SOUTHWOOD BLVD. ARL., TX 76013	$250.00		RETIRED PUBLIC ACCOUNTANT + PHYSICIAN	
3/15/07	ROY & CAMILLA NEWMAN 1403 CLUBVIEW CT. ARL., TX 76013	$100.00			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# ____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/15/07	KENNETH W. SAMBELL 5501 W. MAYFIELD RD. ARL., TX 76016	$50.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/16/07	TOM + DIANE CRAVENS 501 S. FIELDER ARL., TX 76013	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/16/07	SHANNON ARNOLD 6425 GEHRIG CIR. BURLESON, TX 76028	$250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/17/07	CHARLES GREEN 216 E ABRAM ST. ARL., TX 76010	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID# ____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/07	J. LUKE P.O. BOX 1024 ARL., TX 76004	$200.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/19/07	JANICE THOMPSON 2009 WINTER SUNDAY WAY ARL., TX 76012	$100.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/1/07	HAROLD D. DIXSON 3005 SHADY LN. S ARL., TX 76001	$100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/7/07	KELLY PERKINS 5925 FOREST LN DALLAS, TX 75230	$100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☑ out-of-state PAC (ID#: 74-1801786) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/13/07	ASSOC. OF REALTORS/TREPAC P.O. BOX AUSTIN, TX 78767	$2,000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	DR B. J. MYCOSKIE 1011 SHERWOOD DR. ARL, TX 76013	$100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/20/07	CHARLES + LOU ARNOLD 1416 COUNTRY CLUB DR. ARL., TX 76013	$250.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	JAMES L. MAIBACH 6501 BALDWIN ACRES CT ARL., TX 76001	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
APPRAISER	PEYCO SW

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	ALAN + BONNIE PETSCHE 6713 LAUREL VALLEY DR. FT WORTH, TX 76132	$2,500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
COO	A.E. PETSCHE CO, INC

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	RANDY STEVENSON 2400-A ROOSEVELT ARL., TX 76016	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
REAL ESTATE	SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	JAMES D. SPANIOLO 701 S. NEEDERMAN DR. ARL., TX 76019	$100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PRES.	U.T. ARL.

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/20/07	JULIE H. WILSON 301 COMMERCE ST. FT. WORTH, TX 76102	$2,500.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
	CHESAPEAKE NAT'L GAS

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	CLIFFORD MYCOSKIE 1409 WOODBINE CT. ARL., TX 76012	$500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	SHARON & JAMES HOLDEN 1912 SECRET CT. ARL., TX 76006	$250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
OWNER	THE ELYSIUM SPA

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/22/07	ARNOLD E. PETSCHE 2112 W. DIV. ST. ARL., TX 76012	$2,500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/22/07	& LINDA DIPERT P.O. BOX 580 ARL., TX 76004	$500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission form)

4 Date	5 Full name of contributor ☐ out of state PAC	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/22/07	WILLIAM + JUDITH VERKEST 6 Contributor address, City, State, Zip Code 2402 N. HUNTER LN. ARL., TX. 76006	75.00	
9 Principal occupation RETIRED		10 Employer (optional)	

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
3/23/07	RAY + SHARON GOMEZ Contributor address, City, State, Zip Code 213 STOCKTON DR. SOUTHLAKE, TX 76092	$1,000.00	
Principal occupation CEO		Employer (optional) RAYCO CONSTR., INC.	

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
3/6/07	VAUGHAN MITCHELL Contributor address, City, State, Zip Code 855 TEXAS ST. STE. 105 FT. WORTH, TX 76102	$1,000.00	
Principal occupation		Employer (optional)	

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
3/8/07	GERALD & CRYSTAL MILANO Contributor address, City, State, Zip Code 4409 DADE DR. FLOWER MOUND, TX 75028	$100.00	
Principal occupation		Employer (optional)	

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
3/9/07	TOM MILLER Contributor address, City, State, Zip Code 3193 FANNIN LN. SOUTHLAKE, TX 76092	$200.00	
Principal occupation		Employer (optional)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out of state PAC / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/9/07	GARY D. BROWN 307 QUAIL RIDGE ALEDO, TX 76008	$100.00	

9 Principal occupation

10 Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/16/07	JOE BURKEL 2481 APRIL SOUND LN. FRISCO, TX 75034	$100.00	

Principal occupation

Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/17/07	KENT + D'ANN BESLEY 2800 CALIFORNIA LN. ARL, TX 76015	$100.00	

Principal occupation

Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/07	GARY E. WALKER 101 W RANDOL MILL RD, STE. 120 ARL, TX 76011	$500.00	

Principal occupation

Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/20/07	TIM + MARY JEAN MOLONEY 2008 RUMSON ARL, TX 76006	50.00	

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission form)

4 Date	5 Full name of contributor ☐ out of state PAC / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/20/07	NICHOLAS + LISA STEFKOVICH 6308 EDINBURGH DR. COLLEYVILLE, TX 76034	200.00	

9 Principal occupation	10 Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	GEORGE + SARAH BLUMENSCHEIN 906 W. RANDOL MILL RD. ARL., TX 76012	$1,000.00	

Principal occupation	Employer (optional)

7

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	ARL POLICE ASSOC. RANDLE H. MEADOWS P.O. BOX 856 ARL., TX 76004	$500.00	

Principal occupation	Employer (optional)
PRES	ARL. POLICE ASSOC.

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	ANDREW + ANNA PIEL 4402 MURWICK DR. ARL., TX 76016	$100.00	

Principal occupation	Employer (optional)

Date	Full name of contributor ☐ out of state PAC / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	GLENN + SARA TROUTMAN 3600 YACHTCLUB DR. ARL., TX 76016	$250.00	

Principal occupation	Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission form)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/21/07	CHARLEEN & CRAIG STOCKWELL 6610 LAKE SHORE DR. GARLAND, TX 75044	$500.00	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	SHERRI L. GOMEZ 4236 CASTLE ROCK CT. IRVING, TX 75038	$250.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	LARRY M. MALLORY 2121 PANORAMIC CIR. DALLAS, TX 75212	$100.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	JOE BARTON 104 E. HUME AVE ALEXANDRIA, VA. 22301	$2,500.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	AL HUMPHREY 910 N. DAVIS DR. ARL., TX 76018	$500.00	

Principal occupation | Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/21/07	HAZEL W. LEWIS 1419 CLUBVIEW CT. ARL., TX 76013	$250.00	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	LEE J. CHAPMAN ONE SUMMIT AVE. STE. 501 FT. WORTH, TX 76102	$500.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	FREESE + NICHOLS PAC ROBERT H. HERKENT 4055 INTERNATIONAL PLAZA, STE 200 FT WORTH, TX 76109	$500.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	NICHOLAS + LISA STEFKOVICH 6308 EDINBURGH DR. COLLEYVILLE, TX 76034	$300.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/21/07	GRANT S. MATHEWS 2826 LEGACY POINT DR. ARL., TX 76006	100.00	

Principal occupation | Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/21/07	ANN WEYDECK 3306 THORNTREE ARL., TX. 76016	$100.00	

☐ out of state PAC

9 Principal occupation

10 Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/23/07	JAMES CRIBBS P.O. BOX 13060 ARL., TX. 76094	$500.00	

☐ out of state PAC

Principal occupation: ATTORNEY

Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/25/07	BILL GRAMMER 1000 N. FIELDER RD ARL., TX 76012	$500.00	

☐ out of state PAC

Principal occupation: DENTIST

Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/25/07	JAMES + BANSY JOHNSON 804 WAGGONER DR. ARL., TX 76013	10.00	

☐ out of state PAC

Principal occupation

Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/26/07	BRUCE ASHWORTH 2214 PARK SPRINGS BLVD. ARL., TX 76013	$100.00	

☐ out of state PAC

Principal occupation: ATTORNEY

Employer (optional)

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

Texas Ethics Commission P O Box 12070 Austin Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/26/07	LINDA CARAM 1116 HOUSTON ST. RM 104 FT. WORTH, TX 76102	$150.00	

9 Principal occupation

10 Employer (optional): AT+T

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/26/07	RUDY MARTINEZ 2401 E. RANDOL MILL RD STE. 429 ARL., TX 76011	150.00	

Principal occupation

Employer (optional): AT+T

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/26/07	GARY TERRY 1116 HOUSTON ST., RM 104 FT. WORTH, TX 76102	$150.00	

Principal occupation

Employer (optional): AT+T

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/29/07	JOAN BERGSTROM, M.D. 2500 CANYON RIDGE CT ARL., TX 76006	$500.00	

Principal occupation

Employer (optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/29/07	TOBY GOODMAN ONE HIDDEN LAKE CT MANSFIELD, TX 76063	$500.00	

Principal occupation: ATTORNEY

Employer (optional): GOODMAN + CLARK

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out of state PAC	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/19/07	DOUGLAS + KELLY HAFER 6 Contributor address, City, State, Zip Code 101 E. PARK ROW ARL., TX 76010	$100.00	

9 Principal occupation	10 Employer (optional)

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
3/30/07	DANIEL + NANCY HAGAN Contributor address, City, State, Zip Code 3016 OWENWOOD DR. FT. WORTH, TX 76109	$250.00	

Principal occupation	Employer (optional)
MANAGING DIRECTOR	AMER. AIRLINES

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
4/2/07	JAMES + SHERI QUICK Contributor address, City, State, Zip Code 5912 MOSS DR. ARL., TX 76016	$150.00	

Principal occupation	Employer (optional)

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
4/3/07	WILLIAM + DONNA ROSENBERRY Contributor address, City, State, Zip Code 3609 LAKE POWELL DR. ARL., TX 76013	$150.00	

Principal occupation	Employer (optional)
ATTORNEY	SELF

Date	Full name of contributor ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description (if applicable)
4/3/07	LINDA B. DAVIS Contributor address, City, State, Zip Code P.O. BOX 25 ARL., TX 76004	$50.00	

Principal occupation	Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out of state PAC 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
4/5/07	TREPAC/TX ASSOC. OF REALTORS MARK LEHMAN, LESLIE TREVINO, DANIEL GONZALEZ, CRAIG CHICK P.O. Box 1986 AUSTIN, TX 78767-1986	$1,000.00	

9 Principal occupation	10 Employer (optional)

Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
4/9/07	PEGGY MERRITT 3004 IRON STONE CT. ARL., TX 76006	$500.00	

Principal occupation	Employer (optional)

Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
5/9/07	BETTY MOORE 5901 BAY CLUB DR. ARL., TX 76013	$500.00	

Principal occupation	Employer (optional)

Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation	Employer (optional)

Date	Full name of contributor ☐ out of state PAC Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation	Employer (optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/26/07	JOE BARTON	$500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/8/07	MURPHY TURNER + ASSOC. 816 CONGRESS AVE., STE 1160 AUSTIN, TX 78701	3,945.23

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/20/07	WYNDHAM HOTEL ARL., TX	3,003.48

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/3/07	MURPHY TURNER + ASSOC.	$162.70

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/3/07	SEN. JOHN CORYN	$500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/21/07	WYNDHAM HOTEL ARL., TX	$1,480.59

Purpose of payment (See instructions regarding type of information required.): BAL. ON FUNDRAISER

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/3/07	MURPHY TURNER + ASSOC.	$9,128.98

Purpose of payment (See instructions regarding type of information required.): FUNDRAISER/CAMPAIGN

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

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

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