

# 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:

9

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Mr. Mel LeBlanc

### OFFICE USE ONLY

Date Received

03/17/09 9:20

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

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

Change of Address

2720 Mark Twain Court  
Arlington, TX 76006

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 469-8525

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Joe Way

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

3910 Silkwood Trail, Arlington, TX.

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 572-5770

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 THROUGH Month Day Year  
04/01/08 THROUGH 04/30/09

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  
5/10/08  
 Primary  Runoff  General  Special

12 OFFICE

OFFICE HELD (if any)  
Council Member, District 1

13 OFFICE SOUGHT (if known)  
City Council, District 1

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 Mel LeBlanc 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. ••

<input type="checkbox"/> additional pages	<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>8,840.00</u>
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>401.00</u>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>16,000.00</u>

**19 AFFIDAVIT**

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

M. V. LeBlanc, Jr.  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mel LeBlanc, this the 2nd day of May, 20 08, to certify which, witness my hand and seal of office.

Tina Stewart  
Signature of officer administering oath

Tina Stewart  
Printed name of officer administering oath

notary  
Title of officer administering oath

# 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 <i>Mel LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/11/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Al Clark</i>	7 Amount of contribution (\$) <i>200.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2452 W. I-20 Arlington, TX. 76017</i>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/10/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank Gilstrap</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Box 121248 Arlington, TX. 76012</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/10/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dan DiPort</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Box 520 Arlington, TX. 76004</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/8/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>TIM &amp; Lydia McKibben</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2630 Hemingway Dr. Arlington, TX. 76006</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/16/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ralph V. Shelton &amp; Rae</i>	Amount of contribution (\$) <i>300.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1308 Canterbury Court TX. 76013</i>			
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

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2 FILER NAME <i>Mel LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/10/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Vasudev &amp; Mala Rangadasr</i>	7 Amount of contribution (\$) <i>1,000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2623 Tillman Dr. Arlington, TX. 76006</i>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/10/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>JIM Maibach</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1703 N. Peyco Drive Arlington, TX. 76001</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/9/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i><del>Jim</del> &amp; Peggy Jo Poynter</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2307 Castle Rock Rd. Arlington, TX. 76006</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/9/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mr. &amp; Mrs. C. David Fielder</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2305 Woodson Trail Arlington, TX. 76016</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/18/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Patterson</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2310 W. I-20, Suite 100 Arlington, TX. 76017</i>			
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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2 FILER NAME <i>Mel LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/15/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Billy + Claudia Carnahan</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>2711 Mark Twain Ct. Arlington, TX., 76006</i>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/16/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tim + Mary Jean Moloney</i>	Amount of contribution (\$) <i>40.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2008 Rumson Arlington, TX. 76006</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/18/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gerald Alley</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>606 Loch Chalet Ct. Arlington, TX. 76012</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/10/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Terry + Teresa Gaines</i>	Amount of contribution (\$) <i>50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>711 Findlay Dr. Arlington, TX. 76012</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/12/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>TOM McMahon</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1508 Millbrook Dr. Arlington, TX. 76012</i>			
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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2 FILER NAME <i>Mel LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/17/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Billie Farrar</i>	7 Amount of contribution (\$) <i>250.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1731 Woods Drive Arlington, TX. 76010</i>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/11/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gary Martin</i>	Amount of contribution (\$) <i>300.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Bx 91588 Arlington TX, 76015</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mr + Judy Caughlin Rae</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2105 Shadow Ridge Drive Arlington, TX. 76006</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/15/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sam Mahroug</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2615 Hemingway Drive Arlington, TX. 76006</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/21/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Watson Frazer</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1316 Ridgewood Terrace Arlington, TX. 76012</i>			
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 <i>Mel LeBlanc</i>			3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/16/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Brian + Diane Cotter</i>	7 Amount of contribution (\$) <i>50.00</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>2004 Hill Country Court Arlington, TX. 76012</i>				
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date <i>4/19/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steve + Amy Drake</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>2629 Lincoln Drive. Arlington, TX. 76006</i>				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date <i>4/16/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cliff Mycoskie</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>1409 Woodbine Court Arlington, TX. 76012</i>				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date <i>4/24/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bill Snider</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>2111 N. Collins, Ste. 323 Arlington, TX. 76011</i>				
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date <i>4/23/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Al + Patricia Garza</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>4715 El Salvador Ct. Arlington, TX. 76017</i>				
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 <i>Me/ LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/17/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Apartment Assoc. Tarrant County</i>	7 Amount of contribution (\$) <i>1,500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>6350 Baker Blvd. Ft. Worth, TX. 76118</i>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/28/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hammer &amp; Nails Club</i>	Amount of contribution (\$) <i>250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>6464 Brentwood Stair Rd., Suite 100 Fort Worth, TX. 76112</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/19/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Adlai Pennington</i>	Amount of contribution (\$) <i>300.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4110 Surfside Ct. Arlington, TX. 76016</i>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Mel LeBlanc</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>4/25/08</i>	5 Payee name <i>Craig Ownby</i>	7 Amount (\$) <i>360.00</i>
6 Payee address; City; State; Zip Code <i>208 Blair Lane Arlington, TX. 76014</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>campaign signs</i>		9 <b>** Complete if direct expenditure to benefit C/OH</b> Candidate / Officeholder name      Office sought      Office held
Date <i>4/30/08</i>	Payee name <i>United States Postal Service</i>	Amount (\$) <i>41.00</i>
Payee address; City; State; Zip Code <i>Watson Community Station Arlington, TX.</i>		
Purpose of payment (See instructions regarding type of information required.) <i>postage</i>		Complete if direct expenditure to benefit C/OH Candidate / Officeholder name      Office sought      Office held
Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.)		<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held
Date	Payee name	Amount (\$)
Payee address; City; State; Zip Code		
Purpose of payment (See instructions regarding type of information required.)		<b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held

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