

# 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)  
00062095

**2 PAGE #**  
1 of 212

**3 CANDIDATE /  
OFFICEHOLDER  
NAME**

MS / MRS / MR FIRST MI  
Wendy R.  
.....  
NICKNAME LAST SUFFIX  
Davis

### OFFICE USE ONLY

Date Received

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
P.O. Box 1039  
Fort Worth, TX 76101

☐ Change of Address

Date Hand-delivered or Date Postmarked

Receipt #

Amount

**5 CAMPAIGN  
TREASURER  
NAME**

MS / MRS / MR FIRST MI  
Ralph  
.....  
NICKNAME LAST SUFFIX  
McCloud

Date Processed

Date Imaged

**6 CAMPAIGN  
TREASURER  
ADDRESS**  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
P.O. Box 1039  
Fort Worth, TX 76101

**7 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE PHONE NUMBER EXTENSION  
(817) 886-8863 0

**8 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)

**9 PERIOD  
COVERED**

Month Day Year THROUGH Month Day Year  
07/01/2010 12/31/2010

**10 ELECTION**

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☐ General ☐ Special

**11 OFFICE**

OFFICE HELD (if any)  
State Senator District 10

**12 OFFICE SOUGHT (if known)**

**13 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

**14 C/OH NAME** Davis, Wendy R.

**15 ACCOUNT #** (Ethics Commission filers)  
00062095

**16 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**
**COMMITTEE NAME**
☐ **GENERAL**
**COMMITTEE ADDRESS**
☐ **SPECIFIC**
**COMMITTEE CAMPAIGN TREASURER NAME**
**COMMITTEE CAMPAIGN TREASURER ADDRESS**
☐ additional pages

**17 CONTRIBUTION  
TOTALS**

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

**\$**

880.00

2. **TOTAL POLITICAL CONTRIBUTIONS**  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

**\$**

502,457.04

**EXPENDITURE  
TOTALS**

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

**\$**

696.62

4. **TOTAL POLITICAL EXPENDITURES**
**\$**

145,553.56

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

**\$**

620,960.66

**OUTSTANDING  
LOAN TOTALS**

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

**\$**

0.00

**18 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.

Wendy R. Davis

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Print name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/117 Report: 3/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
A&M PAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78768

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Aberly, Naomi

07/20/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75229

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Volunteer

Employer (See Instructions)  
None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Acme Brick Company Good Government Fund

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-4104

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
ACT for Texas Classroom Teachers Association

09/12/2010

Contributor address; City; State; Zip Code  
Austin, TX 78767-1489

Amount of contribution (\$)  
  
\$3,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Adams, Victoria

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1131

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Mortgage Banker

Employer (See Instructions)  
Colonial Savings

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/117 Report: 4/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/29/2010

5 Full name of contributor ☒ out-of-state PAC (ID# C00011114 )  
AFSCME P.E.O.P.L.E

6 Contributor address; City; State; Zip Code  
Washington, DC 20036

7 Amount of  
contribution (\$)   
  
\$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# )  
Alabama-Coushatta Tribe of Texas

12/09/2010

Contributor address; City; State; Zip Code  
Livingston, TX 77351-4540

Amount of  
contribution (\$)   
  
\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# )  
Aldrich, Robert

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-4919

Amount of  
contribution (\$)   
  
\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Gardner Aldrich

Date

Full name of contributor ☐ out-of-state PAC (ID# )  
Alexander, Jeff

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
HCM Investments

Date

Full name of contributor ☐ out-of-state PAC (ID# )  
Alexander, R. Denny

09/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/117 Report: 5/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/10/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Allen Boone Humphries Robinson LLP

6 Contributor address; City; State; Zip Code  
Houston, TX 77027-7537

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Allison, Joel

08/03/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75231-2501

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President/CEO

Employer (See Instructions)  
Baylor Health Care System

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Amato, Charles

09/12/2010

Contributor address; City; State; Zip Code  
San Antonio, TX 78216-4459

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chairman

Employer (See Instructions)  
Southwest Business Corp.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Anderson, Lee

09/28/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1210

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Physician

Employer (See Instructions)  
Texas Retina Associates

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Anderson, Mark

10/04/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3261

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 4/117 Report: 6/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
  
12/08/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Andrews & Kurth Texas PAC

**6** Contributor address; City; State; Zip Code  
Houston, TX 77002

**7** Amount of contribution (\$)  
  
\$1,000.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Anisman, Karen

09/13/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-1240

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Administrative Staff

Employer (See Instructions)  
TCU

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Apache PAC

12/09/2010

Contributor address; City; State; Zip Code  
Houston, TX 77056-4432

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Appel, Bernard

12/09/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-3117

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Appel Associates

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Appleman, Gordon

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2750

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Thompson & Knight

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

|   |  |  |  |
|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form.         |  | 1 PAGE #<br>Schedule: 5/117 Report: 7/212                                  |  |
| 2 FILER NAME Davis, Wendy R.                                      |  | 3 ACCOUNT # (Ethics Commission filers)<br>00062095                         |  |
| 4 Date<br><br>10/12/2010  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Arlington Police Association PAC<br><br>6 Contributor address; City; State; Zip Code<br>Arlington, TX 76004-0027         | 7 Amount of contribution (\$)<br><br>\$500.00                              | 8 In-kind contribution description (if applicable) |
|   |  | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| 9 Principal occupation / Job title (See Instructions)             |  | 10 Employer (See Instructions)   |  |
| Date<br><br>09/30/2010  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Asher, Garland<br><br>Contributor address; City; State; Zip Code<br>Fort Worth, TX 76110-1149                              | Amount of contribution (\$)<br><br>\$500.00                                | In-kind contribution description (if applicable)   |
|   |  | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| Principal occupation / Job title (See Instructions)<br>Chrm & CEO |  | Employer (See Instructions)<br>Phazar Corp                                 |  |
| Date<br><br>10/12/2010  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Assem, Ola<br><br>Contributor address; City; State; Zip Code<br>Dallas, TX 75219   | Amount of contribution (\$)<br><br>\$100.00                                | In-kind contribution description (if applicable)   |
|   |  | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| Principal occupation / Job title (See Instructions)<br>Owner      |  | Employer (See Instructions)<br>Cleopatra Investments Ltd.                  |  |
| Date<br><br>12/02/2010  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Association of Texas Professional Educators PAC<br><br>Contributor address; City; State; Zip Code<br>Austin, TX 78752-3747 | Amount of contribution (\$)<br><br>\$2,000.00                              | In-kind contribution description (if applicable)   |
|   |  | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| Principal occupation / Job title (See Instructions)               |  | Employer (See Instructions)  |  |
| Date<br><br>10/12/2010  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>AT&T Texas PAC<br><br>Contributor address; City; State; Zip Code<br>Austin, TX 78701-1696                                  | Amount of contribution (\$)<br><br>\$100.00                                | In-kind contribution description (if applicable)   |
|   |  | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| Principal occupation / Job title (See Instructions)               |  | Employer (See Instructions)  |  |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/117 Report: 8/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/13/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Atmos Energy Corporation PAC

6 Contributor address; City; State; Zip Code  
Dallas, TX 75240-2630

7 Amount of contribution (\$)  
  
\$2,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ausley, Robbie

11/29/2010

Contributor address; City; State; Zip Code  
Austin, TX 78731

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
N/A

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Averitt, Kip

12/10/2010

Contributor address; City; State; Zip Code  
Waco, TX 76702-0683

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bailey, Ted

09/14/2010

Contributor address; City; State; Zip Code  
Brecksville, OH 44141-3109

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baillargeon, Bobby

09/28/2010

Contributor address; City; State; Zip Code  
Euless, TX 76040-4021

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
DFW Audi



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/117 Report: 9/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baker, H.B.

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76164-8211

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baker, Jeanne

10/11/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2912

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
BenefiTree Enterprises

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baker, Jeanne

12/09/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2912

Amount of contribution (\$)  
  
\$400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
BenefiTree Enterprises

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baker, William

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76116

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
USN

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baker Botts Amicus Fund

12/07/2010

Contributor address; City; State; Zip Code  
Houston, TX 77002

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/117 Report: 10/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ball, Lamar Jr.

6 Contributor address; City; State; Zip Code  
Irving, TX 75063

7 Amount of  
contribution (\$) \$500.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
CEO

10 Employer (See Instructions)  
Smart Start Inc.

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barbara Ann Radnofsky Campaign Fund

Contributor address; City; State; Zip Code  
Houston, TX 77255

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
08/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bardin, Mary Beth

Contributor address; City; State; Zip Code  
Grapevine, TX 76051-5638

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
N/A

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bargas, Vicki

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Administrative Assistant

Employer (See Instructions)  
Lockheed Martin

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barlow, Karen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1154

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 9/117 Report: 11/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
  
08/24/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Baron, Lisa

**6** Contributor address; City; State; Zip Code  
Dallas, TX 75225-3005

**7** Amount of contribution (\$)  
  
\$2,500.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)  
Attorney

**10** Employer (See Instructions)  
Self-Employed

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barron & Adler L.L.P.

Contributor address; City; State; Zip Code  
Austin, TX 78701-2216

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
08/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barton, J. Cary

Contributor address; City; State; Zip Code  
San Antonio, TX 78205-7820

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Barton East & Caldwell

Date  
  
09/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barton, J. Cary

Contributor address; City; State; Zip Code  
San Antonio, TX 78205-7820

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Barton East & Caldwell

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bearden, Fred

Contributor address; City; State; Zip Code  
Dallas, TX 75367

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Sales

Employer (See Instructions)  
E-Source Equipment

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/117 Report: 12/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/13/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckman, Marlene

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2731

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Real Estate Management

10 Employer (See Instructions)  
Kensington Properties

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beer Alliance of Texas LLC (PAC)

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bell, Carolyn

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-3110

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Volunteer

Employer (See Instructions)  
NA

Date  
  
12/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bell Helicopter Textron Political Committee

Contributor address; City; State; Zip Code  
Fort Worth, TX 76101

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Benacci, Christina

Contributor address; City; State; Zip Code  
San Antonio, TX 78209

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/117 Report: 13/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/09/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Benda, Robert

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-7419

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
executive

10 Employer (See Instructions)  
Westwood Contractors Inc.

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Benda, Robert

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-7419

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive

Employer (See Instructions)  
Westwood Contractors Inc.

Date  
  
10/04/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bennett, Michael

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1014

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Gideon Toal

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Benson, Johnnie

Contributor address; City; State; Zip Code  
Fort Worth, TX 76103

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Health Care

Employer (See Instructions)  
Self

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Berdan, Barclay

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-3545

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Senior Executive Vice President

Employer (See Instructions)  
Texas Resources

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/117 Report: 14/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
09/28/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernoski, Robert

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-7720

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retired

10 Employer (See Instructions)  
Retired

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Berry, Stephen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3851

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Vintage Capital Parnters

Date  
  
09/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Biggins, Lillie

Contributor address; City; State; Zip Code  
Fort Worth, TX 76112

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Vice President of Operations

Employer (See Instructions)  
Harris Methodist Fort Worth

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Biggs, Byron

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3610

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Co-Owner

Employer (See Instructions)  
Glenwood Energy

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bill White Campaign

Contributor address; City; State; Zip Code  
Houston, TX 77219

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/117 Report: 15/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/15/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bill White Campaign

6 Contributor address; City; State; Zip Code  
Houston, TX 77219

7 Amount of contribution (\$)  
  
\$120.00

8 In-kind contribution description (if applicable)  
Inkind: Used computer and printer

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Black, Jill

10/07/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-6410

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Property Manager

Employer (See Instructions)  
Witcher Properties

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blackridge

12/08/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bleicher, Julie

08/03/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75230-4269

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Admin Manager

Employer (See Instructions)  
Tessitura Network

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bley, Laura

09/20/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Bley Investment Group Inc

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/117 Report: 16/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/18/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blue, Susan

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76104

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Physician

10 Employer (See Instructions)  
Neurological Services of Texas

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
BNSF RailPAC

Contributor address; City; State; Zip Code  
Fort Worth, TX 76161

Amount of contribution (\$)  
  
\$1,750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bodoin Agnew Green & Maxwell PC

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-6882

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bolen, Bob

Contributor address; City; State; Zip Code  
Fort Worth, TX 76133

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Senior Advisor to Chancellor

Employer (See Instructions)  
TCU

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bonilla, Eva

Contributor address; City; State; Zip Code  
Fort Worth, TX 76133-7925

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
N/A



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/117 Report: 17/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boone, Aimee

6 Contributor address; City; State; Zip Code  
Austin, TX 78704

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)  
Event food beverage

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Development Director

10 Employer (See Instructions)  
Texas Democratic Trust

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boone, Cecilia

Contributor address; City; State; Zip Code  
Dallas, TX 75219-5016

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)  
Food beverage for event.

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
Homemaker

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Border Health PAC

Contributor address; City; State; Zip Code  
McAllen, TX 78504

Amount of contribution (\$)  
  
\$10,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boschini, Victor Jr.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chancellor

Employer (See Instructions)  
TCU

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boswell Interests LTD

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/117 Report: 18/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/03/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boyan, Elise

6 Contributor address; City; State; Zip Code  
San Antonio, TX 78209-6148

7 Amount of contribution (\$)  
  
\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
None

10 Employer (See Instructions)  
None

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bracewell & Giuliani Committee

Contributor address; City; State; Zip Code  
Houston, TX 77002-2770

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bradbury, Elizabeth

Contributor address; City; State; Zip Code  
Austin, TX 78730-1414

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
N/A

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bradbury, Elizabeth

Contributor address; City; State; Zip Code  
Austin, TX 78730-1414

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
N/A

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bramblett, George Jr

Contributor address; City; State; Zip Code  
Dallas, TX 75205-3818

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Haynes and Boone LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/117 Report: 19/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Braun, David

6 Contributor address; City; State; Zip Code  
Dripping Springs, TX 78620-0466

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Self

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bresnen, Steve

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Steve Bresnen & Associates

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brewer, Flora

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132-1140

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
Helping Restore Ability

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brewer, Flora

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132-1140

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
Helping Restore Ability

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brightbill, L.O. III

Contributor address; City; State; Zip Code  
Fort Worth, TX 76179

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Director

Employer (See Instructions)  
Southwest Bank

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/117 Report: 20/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Broiles, David

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76108-9766

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Cagle Broiles

Date  
  
10/18/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brotherhood of Locomotive Engineers and Trainmen

Contributor address; City; State; Zip Code  
Richland Hills, TX 76118-6372

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Broude, John

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Broude Smith & Jennings P.C.

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brous, Sam

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Co-Founder/Principal

Employer (See Instructions)  
The Westover Group

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brumley, I. Jon Sr.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-4906

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chairman

Employer (See Instructions)  
Brumley Investments

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/117 Report: 21/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brundrett, Thad

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Landscape Architect

10 Employer (See Instructions)  
Jacobs

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bryant, Vernon

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chairman and CEO

Employer (See Instructions)  
Southwest Bank

Date  
  
10/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Buff, Gary

Contributor address; City; State; Zip Code  
Benbrook, TX 76126-2455

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
VP

Employer (See Instructions)  
ACH

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Butt, Charles

Contributor address; City; State; Zip Code  
San Antonio, TX 78204-1317

Amount of contribution (\$)  
  
\$2,273.81

In-kind contribution description (if applicable)  
Event expense

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
HEB Grocery Stores

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Butt, Charles

Contributor address; City; State; Zip Code  
San Antonio, TX 78204-1317

Amount of contribution (\$)  
  
\$10,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
HEB Grocery Stores

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 20/117 Report: 22/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/23/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Butt, Stephen

6 Contributor address; City; State; Zip Code  
Dallas, TX 75205-3168

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retail Executive

10 Employer (See Instructions)  
HEB/Central Market

Date  
  
12/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Caperton, Kent

Contributor address; City; State; Zip Code  
Austin, TX 78746-1460

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
attorney

Employer (See Instructions)  
Ben Barnes Group

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Carlyle/Cypress West 7th LLC

Contributor address; City; State; Zip Code  
Dallas, TX 75225-5886

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Carvey, Louise

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2623

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
09/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Casani, Andrew

Contributor address; City; State; Zip Code  
Arlington, TX 76006-4272

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Management

Employer (See Instructions)  
UTA

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/117 Report: 23/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Casey, Colleen

6 Contributor address; City; State; Zip Code  
San Antonio, TX 78209

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Realtor

10 Employer (See Instructions)  
Phyllis Browning Company

Date  
  
08/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cathey, Damon

Contributor address; City; State; Zip Code  
Richardson, TX 75081

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Computer Programmer

Employer (See Instructions)  
Calpont Corporation

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Centene Corporation PAC

Contributor address; City; State; Zip Code  
Austin, TX 78704

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
07/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
CH2M Hill Texas PAC

Contributor address; City; State; Zip Code  
Dallas, TX 75251

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chalk, John Allen Sr.

Contributor address; City; State; Zip Code  
Aledo, TX 76008

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Whitaker Chalk Swindle & Sawyer LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/117 Report: 24/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/29/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chambers, Martha

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2012

7 Amount of contribution (\$)  
  
\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retired

10 Employer (See Instructions)  
Retired

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chambers, Martha

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2012

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chappell, David

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-3685

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger LLP

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Charles A. Gonzalez Congressional Campaign

Contributor address; City; State; Zip Code  
San Antonio, TX 78212

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
07/23/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Chase, Scott

Contributor address; City; State; Zip Code  
Dallas, TX 75219-5139

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
attorney

Employer (See Instructions)  
self



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/117 Report: 25/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cheng, Paul

6 Contributor address; City; State; Zip Code  
Plano, TX 75093

7 Amount of  
contribution (\$)  
  
\$5,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Investments

10 Employer (See Instructions)  
Self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Choctaw Nation of Oklahoma

Contributor address; City; State; Zip Code  
Durant, OK 74702-1210

Amount of  
contribution (\$)  
  
\$5,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Ben

Contributor address; City; State; Zip Code  
Dallas, TX 75205-1521

Amount of  
contribution (\$)  
  
\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Celanese Corp

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Clark, Linda

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of  
contribution (\$)  
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Kline & Co.

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
CLS Consulting

Contributor address; City; State; Zip Code  
Austin, TX 78701-2402

Amount of  
contribution (\$)  
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/117 Report: 26/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coalition for Better Transportation

6 Contributor address; City; State; Zip Code  
Dallas, TX 75221-1590

7 Amount of contribution (\$)  
  
\$1,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coats Rose PAC

12/02/2010

Contributor address; City; State; Zip Code  
Houston, TX 77046

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coats Rose Yale Ryman & Lee PC PAC

10/12/2010

Contributor address; City; State; Zip Code  
Houston, TX 77046

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cockerell, Perry

10/15/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75214-4921

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coleman, Joyce

08/24/2010

Contributor address; City; State; Zip Code  
San Antonio, TX 78212

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/117 Report: 27/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/29/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Jeremiah

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of  
contribution (\$) \$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Manager

10 Employer (See Instructions)  
GSE Consulting LP

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Collins, Lawrence

Contributor address; City; State; Zip Code  
Austin, TX 78703-2950

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consulting

Employer (See Instructions)  
Self

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Comm. for Public Safety Fort Worth Police Officers Assn.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of  
contribution (\$) \$3,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Conley, William

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-3432

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chairman and CEO

Employer (See Instructions)  
Sky-Trax Inc.

Date  
  
07/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Connelly, Serena

Contributor address; City; State; Zip Code  
Farmers Branch, TX 75234-6434

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Foundation Director

Employer (See Instructions)  
Contran Corp.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/117 Report: 28/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Conner, Halden

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3828

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
Allcare Inc

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cook, Sherri

Contributor address; City; State; Zip Code  
Dallas, TX 75218-2774

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Teacher

Employer (See Instructions)  
Bishop Lynch High School

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cornell, Pat

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$2,510.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Developer

Employer (See Instructions)  
Railhead Properties

Date  
  
09/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coslik, Stephen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3546

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Woodmont Company

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cottongame, James

Contributor address; City; State; Zip Code  
Fort Worth, TX 76082

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Developer

Employer (See Instructions)  
Self Employed

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/117 Report: 29/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/08/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
CP&Y Inc. PAC

6 Contributor address; City; State; Zip Code  
Dallas, TX 75235

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Craddock, Mike

09/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1305

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Craddock Moving & Storage

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cranshaw, Dorothy

12/10/2010

Contributor address; City; State; Zip Code  
Plano, TX 75024-4571

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cranz, Alice

09/28/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Crowson, William

09/24/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76161

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Air Traffic Controller

Employer (See Instructions)  
FAA

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/117 Report: 30/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
08/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cruz, Mary Lee

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2556

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Owner

10 Employer (See Instructions)  
E Source Inc.

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Culebro, Kathleen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Artistic Director

Employer (See Instructions)  
Amphibian Productions

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Culver, Lezlie

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-5589

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
None

Date  
  
12/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cummings Electrical PAC

Contributor address; City; State; Zip Code  
Fort Worth, TX 76155-2749

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cureton, Robert

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/117 Report: 31/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Curtis, Matt

6 Contributor address; City; State; Zip Code  
Austin, TX 78703-4957

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dailey, Michael

10/12/2010

Contributor address; City; State; Zip Code  
Arlington, TX 76013

Amount of contribution (\$)  
  
\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dale, Lawrence

08/03/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75205-1729

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Dale Resources

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Daniels, Randy

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-4159

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Early

11/05/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President/Fort Worth Division

Employer (See Instructions)  
Republic Title of Fort Worth

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 30/117 Report: 32/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/14/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Jill

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-3527

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Self

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dawson, Sam

Contributor address; City; State; Zip Code  
San Antonio, TX 78230-5651

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Pape Dawson Engineers

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dawson-Thompson, Rosalyn

Contributor address; City; State; Zip Code  
Dallas, TX 75225-1803

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Dawson Murray Teague

Date  
  
12/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Day, Sissy

Contributor address; City; State; Zip Code  
Arlington, TX 76012

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
De La Torre, Kelsey

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Embargo



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 31/117 Report: 33/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/29/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dean, David

6 Contributor address; City; State; Zip Code  
Dallas, TX 75231-5911

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President & CEO

10 Employer (See Instructions)  
Dean International

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Deloitte Texas Political Action Committee

12/07/2010

Contributor address; City; State; Zip Code  
Austin, TX 78711

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
DeMoss, Margaret

09/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
None

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
DENPAC (Texas Dental Assn. PAC)

11/29/2010

Contributor address; City; State; Zip Code  
Austin, TX 78704

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Devero, Kenneth

10/15/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Housing Development

Employer (See Instructions)  
Development Coporation of Tarrant Co.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 32/117 Report: 34/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
07/23/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Diamond, Susan

6 Contributor address; City; State; Zip Code  
Dallas, TX 75229-4316

7 Amount of  
contribution (\$)  
  
\$500.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Homemaker

10 Employer (See Instructions)  
None

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dickson, Angie

Contributor address; City; State; Zip Code  
Colleyville, TX 76034-5320

Amount of  
contribution (\$)  
  
\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
consulting

Employer (See Instructions)  
self employed

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dickson, Angie

Contributor address; City; State; Zip Code  
Colleyville, TX 76034-5320

Amount of  
contribution (\$)  
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
consulting

Employer (See Instructions)  
self employed

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Diehl, Nancy

Contributor address; City; State; Zip Code  
San Antonio, TX 78210-1266

Amount of  
contribution (\$)  
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Writer/Editor

Employer (See Instructions)  
Self

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dipert, Dan

Contributor address; City; State; Zip Code  
Arlington, TX 76017

Amount of  
contribution (\$)  
  
\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Dipert Travel

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 33/117 Report: 35/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dobson, Casey

6 Contributor address; City; State; Zip Code  
Austin, TX 78703-1943

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Scott Douglass & McConnico LLP

Date  
  
09/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dunning, Sally

Contributor address; City; State; Zip Code  
Dallas, TX 75220-2227

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Interior Designer

Employer (See Instructions)  
Self

Date  
  
12/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Durant, Tom

Contributor address; City; State; Zip Code  
Grapevine, TX 76099-1717

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Classic Chevrolet

Date  
  
10/22/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Eagle, Jim

Contributor address; City; State; Zip Code  
Fort Worth, TX 76101-1867

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Red Oak Realty LLC

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Eaton, Jeff

Contributor address; City; State; Zip Code  
Arlington, TX 76015-1900

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Accountant

Employer (See Instructions)  
Spillar Mitcham Eaton & Bicknell LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 34/117 Report: 36/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/19/2010

5 Full name of contributor ☒ out-of-state PAC (ID# C00082792 )  
Eli Lilly & Company PAC

6 Contributor address; City; State; Zip Code  
Indianapolis, IN 46285-0001

7 Amount of  
contribution (\$)   
  
\$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, Dorothy

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of  
contribution (\$)   
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, L.W.

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Brackett & Ellis P.C.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, Nita

10/29/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of  
contribution (\$)   
  
\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Educator

Employer (See Instructions)  
Weatherford ISD

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ellis, Nita

12/09/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Educator

Employer (See Instructions)  
Weatherford ISD

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 35/117 Report: 37/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Empire Disposal Ltd

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76119-6568

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☒ out-of-state PAC (ID# C00219642 )  
Enterprise Holdings Inc. PAC

12/02/2010

Contributor address; City; State; Zip Code  
Saint Louis, MO 63105-4204

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Epstein, Steve

07/23/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76134

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Erwin, Jimmy

12/02/2010

Contributor address; City; State; Zip Code  
Houston, TX 77204

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Behringer Harvard

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Estess, Henry Jr.

07/20/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75220-2255

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 36/117 Report: 38/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/30/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Estess, Henry Jr.

6 Contributor address; City; State; Zip Code  
Dallas, TX 75220-2255

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retired

10 Employer (See Instructions)  
Retired

Date  
  
11/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Evans, Allene

Contributor address; City; State; Zip Code  
Austin, TX 78737-1228

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
lawyer

Employer (See Instructions)  
self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Evans, Charlie

Contributor address; City; State; Zip Code  
Austin, TX 78767

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Governmental Affairs Ltd

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Evans, Tim

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Evans Gandy Daniel & Moore

Date  
  
07/16/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fagadau, Patricia

Contributor address; City; State; Zip Code  
Dallas, TX 75229

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/117 Report: 39/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fenderson, Kevan

6 Contributor address; City; State; Zip Code  
Lewisville, TX 75077-1811

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Director Government Relations

10 Employer (See Instructions)  
Brinker International

Date  
  
09/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fernandez, Robert

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1030

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CPA

Employer (See Instructions)  
Fernandez & Co.

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fersing, Jan

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/22/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fidelity Southwest Good Government Committee

Contributor address; City; State; Zip Code  
Westlake, TX 76262-8103

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
FIG Designers LLC

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2912

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/117 Report: 40/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/31/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fikes, Amy

6 Contributor address; City; State; Zip Code  
Dallas, TX 75205

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Homemaker

10 Employer (See Instructions)  
Self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Finley, Susie

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3593

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manufacturing

Employer (See Instructions)  
Brand Fx Body Co.

Date  
  
10/18/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fletcher, Jim

Contributor address; City; State; Zip Code  
Colleyville, TX 76034

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
08/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Flynn, Pat

Contributor address; City; State; Zip Code  
San Antonio, TX 78216

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
07/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Franke, Robert

Contributor address; City; State; Zip Code  
Dallas, TX 75243-3754

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal Executive Vice President

Employer (See Instructions)  
BWR



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 39/117 Report: 41/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/08/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Freese & Nichols PAC

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-4814

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fried, Monica

08/30/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75220-2006

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Physician

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Friedman, Walker

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Friends Of The University PAC

12/07/2010

Contributor address; City; State; Zip Code  
Austin, TX 78763

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fulbright & Jaworski Texas Committee

09/28/2010

Contributor address; City; State; Zip Code  
Houston, TX 77010-3095

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 40/117 Report: 42/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gardere Wynne Sewell LLP Campaign Fund

6 Contributor address; City; State; Zip Code  
Dallas, TX 75201

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Garrett, D E

12/10/2010

Contributor address; City; State; Zip Code  
Bedford, TX 76021-4173

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
N/A

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gates, Reginald

10/12/2010

Contributor address; City; State; Zip Code  
Ft Worth, TX 76119-3109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Vice Chancellor

Employer (See Instructions)  
Tarrant County College District

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gatlin, Lynette

08/03/2010

Contributor address; City; State; Zip Code  
San Antonio, TX 78209

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gaupp, Peter

10/26/2010

Contributor address; City; State; Zip Code  
Arlington, TX 76016-1557

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
retired

Employer (See Instructions)  
retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 41/117 Report: 43/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gavras, Chris

6 Contributor address; City; State; Zip Code  
Arlington, TX 76011-3216

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Business owner

10 Employer (See Instructions)  
CGG

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gearheart, Joseph

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3741

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Contractor

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Girouard, Marvin

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1134

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
11/26/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Glassco, David

Contributor address; City; State; Zip Code  
Austin, TX 78704-3640

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
self

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gomez, Jose

Contributor address; City; State; Zip Code  
Dallas, TX 75229

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Medical Officer

Employer (See Instructions)  
Department of Justice

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 42/117 Report: 44/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)

00062095

**4** Date  
  
07/17/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gooch, Tom

**6** Contributor address; City; State; Zip Code  
Fort Worth, TX 76132-1109

**7** Amount of contribution (\$)  
  
\$250.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Good Government Fund (Fort Worth)

10/18/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gould, Warren

10/15/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3334

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Granek, Harold

09/19/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76104-3021

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Physician

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Grant, Kathy

10/12/2010

Contributor address; City; State; Zip Code  
Austin, TX 78704-4131

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Lobbyist

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 43/117 Report: 45/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
12/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Grant, Kathy

6 Contributor address; City; State; Zip Code  
Austin, TX 78704-4131

7 Amount of contribution (\$)  
  
\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Lobbyist

10 Employer (See Instructions)  
Self

Date  
  
08/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gravely & Pearson LLP

Contributor address; City; State; Zip Code  
San Antonio, TX 78205

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Graydon Group LLC

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Greenberg Traurig P.A. PAC

Contributor address; City; State; Zip Code  
Miami, FL 33131-3224

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/20/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Greenhill, William

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Haynes and Boone LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 44/117 Report: 46/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/24/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gregory, Bob

6 Contributor address; City; State; Zip Code  
Austin, TX 78746-1961

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Chairman CEO Principal Owner

10 Employer (See Instructions)  
Texas Disposal Systems

Date  
  
07/16/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Griswold, Gail

Contributor address; City; State; Zip Code  
Dallas, TX 75225-2824

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
None

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gulf States Toyota Inc. State PAC

Contributor address; City; State; Zip Code  
Houston, TX 77024

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hadley, Erma

Contributor address; City; State; Zip Code  
Fort Worth, TX 76119

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
College Executive

Employer (See Instructions)  
Tarrant County College

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hahnfeld, Eric

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1219

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Hahnfeld Hoffer Stanford

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 45/117 Report: 47/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/08/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Halff Associates State PAC

6 Contributor address; City; State; Zip Code  
Richardson, TX 75081-2262

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hall, Bill

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1137

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chairman

Employer (See Instructions)  
William G. Hal Co.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hallam, Robert

07/14/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75235-6220

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Wholesaler

Employer (See Instructions)  
Ben E. Keith Co.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Halperin, Gayle

08/24/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75205-1727

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Co-owner

Employer (See Instructions)  
Heritage Auction Galleries

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Haney, Michael

12/11/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76114-4453

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
N/A

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 46/117 Report: 48/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hanratty, Linda

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hansen, Kathryn

10/07/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive Vice President

Employer (See Instructions)  
Texas Industrial Security

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harden Healthcare Texas PAC

09/24/2010

Contributor address; City; State; Zip Code  
Austin, TX 78703-4896

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harden Healthcare Texas PAC

11/29/2010

Contributor address; City; State; Zip Code  
Austin, TX 78703-4896

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harkinson, Sarah

08/30/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75229-6407

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Harkinson Investments



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 47/117 Report: 49/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/09/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harman, Judith

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Community Volunteer

10 Employer (See Instructions)  
None

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harper, Stanley

Contributor address; City; State; Zip Code  
Mansfield, TX 76063-3477

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Harper Investments

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harrington, Marilyn

Contributor address; City; State; Zip Code  
Boerne, TX 78015

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
07/20/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hart, Kelly

Contributor address; City; State; Zip Code  
Plano, TX 75023

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Director of Public Affairs

Employer (See Instructions)  
Planned Parenthood of North Texas

Date  
  
11/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hartman, Gordon

Contributor address; City; State; Zip Code  
San Antonio, TX 78216

Amount of contribution (\$)  
  
\$3,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Gordon V. Hartman Enterprises Inc.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 48/117 Report: 50/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harvison, John

6 Contributor address; City; State; Zip Code  
Ft Worth, TX 76106-2219

7 Amount of  
contribution (\$) \$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
COB

10 Employer (See Instructions)  
Dynamic Production

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Haubold, R.E.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132-4016

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Havener, Gary

Contributor address; City; State; Zip Code  
Fort Worth, TX 76121

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
Self

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hays, Susan

Contributor address; City; State; Zip Code  
Dallas, TX 75214-5346

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Geisler Hays

Date  
  
07/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
HDR PAC

Contributor address; City; State; Zip Code  
Omaha, NE 68114

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 49/117 Report: 51/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
12/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Headden, Bert

6 Contributor address; City; State; Zip Code  
Dallas, TX 75218-4316

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Investor

10 Employer (See Instructions)  
Self-employed

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Heart PlacePAC

Contributor address; City; State; Zip Code  
Dallas, TX 75248-1974

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Helfand, Marcy

Contributor address; City; State; Zip Code  
Dallas, TX 75240-5510

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Marcy C. Helfand P.C.

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Heller, J. David

Contributor address; City; State; Zip Code  
Chagrin Falls, OH 44022-6870

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
11/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Henderson, Richard

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-2835

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 50/117 Report: 52/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hickman, Holt

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76101

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Executive

10 Employer (See Instructions)  
Hickman Companies

Date  
  
11/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hicks, Renea

Contributor address; City; State; Zip Code  
Austin, TX 78756

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hill, Fred

Contributor address; City; State; Zip Code  
Richardson, TX 75080-6224

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Government Relations

Employer (See Instructions)  
Self

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hill, Suzi

Contributor address; City; State; Zip Code  
Fort Worth, TX 76103-2157

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
The Hill Company

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
HillCo PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701-2458

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 51/117 Report: 53/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/29/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
HillCo PAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78701-2458

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hinojosa, Alfredo

08/24/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75214

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Business Owner

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hobby, William

12/07/2010

Contributor address; City; State; Zip Code  
Houston, TX 77001-0326

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hoffman, Marguerite

07/16/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75220-2042

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive/Investments

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holland, Barney Jr.

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Barney Holland Oil Co.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 52/117 Report: 54/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
09/24/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holmes, Tracy

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3064

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Investments

10 Employer (See Instructions)  
Self

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holmes, Tracy

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3064

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Self

Date  
  
08/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holt, Peter

Contributor address; City; State; Zip Code  
Blanco, TX 78606-4764

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
HOLT CAT

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holzer, Anna

Contributor address; City; State; Zip Code  
Hurst, TX 76053-6317

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
HOME PAC of Texas

Contributor address; City; State; Zip Code  
Austin, TX 78701-1957

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 53/117 Report: 55/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
11/19/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Horowitz, Daniel

**6** Contributor address; City; State; Zip Code  
Houston, TX 77002

**7** Amount of contribution (\$)  
\$500.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)  
Attorney

**10** Employer (See Instructions)  
Abraham Watkins Nichols Sorrels & Friend

Date  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Houston Professional Fire Fighters Assn. Local #341 PAC

Contributor address; City; State; Zip Code  
Houston, TX 77009

Amount of contribution (\$)  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Howe, Chris

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-1023

Amount of contribution (\$)  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Kelly Hart & Hallman

Date  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Huff, Jack

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-2837

Amount of contribution (\$)  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Huff Partners

Date  
12/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Huffman, Laura

Contributor address; City; State; Zip Code  
Austin, TX 78759-7180

Amount of contribution (\$)  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
State Executive Director

Employer (See Instructions)  
The Nature Conservancy

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 54/117 Report: 56/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/24/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hughes, Ken

6 Contributor address; City; State; Zip Code  
Dallas, TX 75205-1636

7 Amount of contribution (\$)  
  
\$1,250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Developer

10 Employer (See Instructions)  
Hughes Development

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
INDEPAC

Contributor address; City; State; Zip Code  
Round Rock, TX 78680-0127

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Independent Bankers Association of Texas PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Isgur, Stuart

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Agent/RR

Employer (See Instructions)  
New York Life

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jackson Walker LLP

Contributor address; City; State; Zip Code  
Dallas, TX 75202-3748

Amount of contribution (\$)  
  
\$1,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 55/117 Report: 57/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/23/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jagers, Rusty

6 Contributor address; City; State; Zip Code  
Dallas, TX 75225-2814

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Homemaker

10 Employer (See Instructions)  
None

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
James, Grant

Contributor address; City; State; Zip Code  
Benbrook, TX 76126-1620

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Banker

Employer (See Instructions)  
Community Trust Bank

Date  
  
09/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jensen, Daniel

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
V.P. for Government Affairs

Employer (See Instructions)  
UNT Health Science Center

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, James

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-4646

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Holiday Chevrolet

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Jim

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Development Director

Employer (See Instructions)  
Downtown Fort Worth Inc.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 56/117 Report: 58/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Melody

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-5589

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Superintendent

10 Employer (See Instructions)  
FWISD

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Roland

Contributor address; City; State; Zip Code  
Willow Park, TX 76008-2914

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Harris Finley & Bogle P.C.

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson-Plump, Nanci

Contributor address; City; State; Zip Code  
Arlington, TX 76017-2139

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Partner

Employer (See Instructions)  
Peloton Commercial Real Estate

Date  
  
11/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Melissa

Contributor address; City; State; Zip Code  
Austin, TX 78703-2520

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
community volunteer

Employer (See Instructions)  
retired

Date  
  
08/27/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jonsson, Christina

Contributor address; City; State; Zip Code  
Dallas, TX 75205

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 57/117 Report: 59/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/10/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jordan, Bill

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
The Center for Cancer and Blood Disorders

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jose Henry Brantley Maclean & Alvarado LLP

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1479

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Junior and Community College PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701-1618

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/18/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
K&L Gates LLP Committee for Good Government

Contributor address; City; State; Zip Code  
Dallas, TX 75201-7342

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kamm, Robert

Contributor address; City; State; Zip Code  
Austin, TX 78701-1629

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 58/117 Report: 60/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kasten, Nancy

6 Contributor address; City; State; Zip Code  
Dallas, TX 75229-5560

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Rabbi

10 Employer (See Instructions)  
Self

Date  
  
07/16/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kastl Law P.C.

Contributor address; City; State; Zip Code  
Dallas, TX 75204-3163

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kearney, Jeff

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2403

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Keltner, David

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Keltner Law Firm

Date  
  
10/18/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kilborne, William

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 59/117 Report: 61/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/17/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kincaid, Mark

6 Contributor address; City; State; Zip Code  
Austin, TX 78701-3015

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Kincaid & Horton LLP

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
King, Carol

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-3113

Amount of contribution (\$)  
  
\$75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manufacturing

Employer (See Instructions)  
Self

Date  
  
11/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Klein, Michael

Contributor address; City; State; Zip Code  
Midland, TX 79701-4204

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Koch, Diana

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Komatsu, Karl

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1715

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Komatsu Architecture

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 60/117 Report: 62/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/18/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kovich, Ann

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76116

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Vice President

10 Employer (See Instructions)  
Turner Collie & Braden Inc.

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krampitz, Thomas

Contributor address; City; State; Zip Code  
Dallas, TX 75205

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Krampitz, Thomas

Contributor address; City; State; Zip Code  
Dallas, TX 75205

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kubes, Rick

Contributor address; City; State; Zip Code  
Ft.Worth, TX 76116

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retail Jeweler

Employer (See Instructions)  
Kubes Jewelers

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
LaBoon, R. Bruce

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Locke Lord Bissell & Liddell

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 61/117 Report: 63/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lamantia, Joe III

6 Contributor address; City; State; Zip Code  
McAllen, TX 78501-9160

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Beer distributor

10 Employer (See Instructions)  
L&F Distributors LTD.

Date  
  
09/20/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Landrum, Tony

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
TLC Urban

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Langdon, John

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Lone Star Film Society

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Larson, Jack

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-5347

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Mellina & Larson PC

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Laureyns, Irene

Contributor address; City; State; Zip Code  
Fort Worth, TX 76116-7926

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Landlord

Employer (See Instructions)  
Self employed

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 62/117 Report: 64/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Leatherwood, Joe

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76133-5461

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Commercial Underwriting

10 Employer (See Instructions)  
Republic Title Company

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Leavens, Adelaide

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2758

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Leonard, Martha

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3537

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Business Owner

Employer (See Instructions)  
Self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Levens, Sam

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1716

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Crestline Investors

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Licensed Beverage Distributors PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 63/117 Report: 65/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
08/03/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lill, Veletta

6 Contributor address; City; State; Zip Code  
Dallas, TX 75223-1104

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Executive

10 Employer (See Instructions)  
Dallas Arts

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Linebarger Goggan Blair & Sampson LLP

Contributor address; City; State; Zip Code  
Austin, TX 78760

Amount of contribution (\$)  
  
\$1,250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Livingston, Kathy

Contributor address; City; State; Zip Code  
Fort Worth, TX 76108-9477

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Interim Executive Director

Employer (See Instructions)  
Courage & Renewal North Texas

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lloyd Gosselink Rochelle & Townsend PC

Contributor address; City; State; Zip Code  
Austin, TX 78701-2478

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☒ out-of-state PAC (ID# C00303024)  
Lockheed Martin Employee's PAC

Contributor address; City; State; Zip Code  
Arlington, VA 22202

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 64/117 Report: 66/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/22/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Logan, Lori

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Controller

10 Employer (See Instructions)  
Texas Wesleyan University

Date  
  
10/21/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lone Star Fund

Contributor address; City; State; Zip Code  
Washington, DC 20003

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)  
In-Kind List

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/25/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lone Star Fund

Contributor address; City; State; Zip Code  
Washington, DC 20003

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)  
In-Kind List

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Long, Ronnie

Contributor address; City; State; Zip Code  
Fort Worth, TX 76117

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Bail Bondsman

Employer (See Instructions)  
Ronnie Long Bail Bonds

Date  
  
11/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Longley, Joe

Contributor address; City; State; Zip Code  
Austin, TX 78701-1063

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Law Office of Joe K. Longley

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 65/117 Report: 67/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Louden, G. Malcolm

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
Walsh Holdings LLC

Date  
  
10/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Loughry, Ben

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-2620

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Appraiser

Employer (See Instructions)  
Integra Realty Resources DFW LLP

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Loveless, Jim

Contributor address; City; State; Zip Code  
Fort Worth, TX 76111

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowrance, Dan

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowrance, Dan

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 66/117 Report: 68/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/24/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowry, William

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Radiologist

10 Employer (See Instructions)  
Radiology Associates Tarrant

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lycke, Edith

Contributor address; City; State; Zip Code  
Dallas, TX 75229-4221

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
Self

Date  
  
07/23/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
MacLean, Leslie

Contributor address; City; State; Zip Code  
Dallas, TX 75209

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Waters & Kraus

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
MacLean, Pepper

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1638

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Jose Henry Brantley MacLean & Alvarado LLC

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Macon, Jane

Contributor address; City; State; Zip Code  
San Antonio, TX 78205

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Fulbright & Jaworski L.L.P.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 67/117 Report: 69/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/09/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mallick, Michael

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-3353

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Real Estate Developer

10 Employer (See Instructions)  
Self

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maloney, Pat Jr.

Contributor address; City; State; Zip Code  
San Antonio, TX 78205

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Law Offices of Pat Maloney P.C.

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Manzori, Arash

Contributor address; City; State; Zip Code  
Richland Hls, TX 76180-8368

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Cardiologist

Employer (See Instructions)  
Heart Place

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Markson, Dan

Contributor address; City; State; Zip Code  
San Antonio, TX 78212-2806

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive Vice President

Employer (See Instructions)  
The NRP Group

Date  
  
11/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Marston, Jim

Contributor address; City; State; Zip Code  
Austin, TX 78703-1645

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Environmental Defense Fund

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 68/117 Report: 70/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
12/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martin, Jack

6 Contributor address; City; State; Zip Code  
Austin, TX 78746-1222

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Chairman

10 Employer (See Instructions)  
Public Strategies

Date  
  
09/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martin & Drought PC

Contributor address; City; State; Zip Code  
San Antonio, TX 78205

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Massey, Mark

Contributor address; City; State; Zip Code  
Bedford, TX 76021-2547

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
My Credit Union

Date  
  
08/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mast, Jorg

Contributor address; City; State; Zip Code  
Dallas, TX 75225

Amount of contribution (\$)  
  
\$1,250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Developer

Employer (See Instructions)  
Hughes/Mast

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Matrix Holdings LP

Contributor address; City; State; Zip Code  
Fort Worth, TX 76104

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 69/117 Report: 71/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/14/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Matthews, Matt

6 Contributor address; City; State; Zip Code  
Austin, TX 78746-1815

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Matt Matthews and Co LLC

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Matthews, Matt

Contributor address; City; State; Zip Code  
Austin, TX 78746-1815

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Matt Matthews and Co LLC

Date  
  
12/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mauro, Garry

Contributor address; City; State; Zip Code  
Austin, TX 78711

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maxwell, Stephen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-7206

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Bodoin Agnew Greene & Maxwell P.C.

Date  
  
08/25/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCarley, James

Contributor address; City; State; Zip Code  
Dallas, TX 75248-1784

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
consultant

Employer (See Instructions)  
self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 70/117 Report: 72/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCarthy, Francis

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76104-4472

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
CPA/Developer

10 Employer (See Instructions)  
Self

Date  
  
07/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McClure, Madeline

Contributor address; City; State; Zip Code  
Dallas, TX 75209-2405

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Child Advocate

Employer (See Instructions)  
TexProtects

Date  
  
07/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McDermott, Robert

Contributor address; City; State; Zip Code  
Dallas, TX 75252-2730

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive Vice President

Employer (See Instructions)  
Huitt-Zollars Inc

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McReynolds, Kathy

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-1112

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
Texas Industrial Security

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McWilliams, Andrea

Contributor address; City; State; Zip Code  
Austin, TX 78703-3104

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
McWilliams & Associates Inc.



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 71/117 Report: 73/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McWilliams, Andrea

6 Contributor address; City; State; Zip Code  
Austin, TX 78703-3104

7 Amount of contribution (\$)  
  
\$971.01

8 In-kind contribution description (if applicable)  
Event food venue

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
McWilliams & Associates Inc.

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Meacham, Phil

Contributor address; City; State; Zip Code  
Woodway, TX 76712

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Vice President/COO

Employer (See Instructions)  
Glazer's Distributors

Date  
  
10/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mellina, David

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2723

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Mellina & Larson PC

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Melton, Warren III

Contributor address; City; State; Zip Code  
Dallas, TX 75223

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
V.P./Pres

Employer (See Instructions)  
Bowman-Melton Associates Inc.

Date  
  
11/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Meredith, Lynn

Contributor address; City; State; Zip Code  
Austin, TX 78701-4082

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
homemaker

Employer (See Instructions)  
N/A

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 72/117 Report: 74/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/04/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mike Moncrief Campaign

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

7 Amount of  
contribution (\$) \$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Miller, A. Bryce

11/30/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-3415

Amount of  
contribution (\$) \$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Endeavor Real Estate Group

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Miller, Tricia

07/30/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75205-3226

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
volunteer

Employer (See Instructions)  
none

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mills, Nelda

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of  
contribution (\$) \$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Board Member

Employer (See Instructions)  
Downwinders

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Minker, Richard

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-4703

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate Broker

Employer (See Instructions)  
Richard D. Minker Co.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 73/117 Report: 75/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mitchell, Kelly

6 Contributor address; City; State; Zip Code  
Plano, TX 75025-5901

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Health Care

10 Employer (See Instructions)  
Heart To Heart Hospice

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mitchell, Kelly

Contributor address; City; State; Zip Code  
Plano, TX 75025-5901

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Health Care

Employer (See Instructions)  
Heart To Heart Hospice

Date  
  
10/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mitchell, Mary

Contributor address; City; State; Zip Code  
Dallas, TX 75225

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
11/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Montford, Debbie

Contributor address; City; State; Zip Code  
San Antonio, TX 78257-1708

Amount of contribution (\$)  
  
\$1,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
None

Date  
  
11/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Montford, John

Contributor address; City; State; Zip Code  
San Antonio, TX 78257-1708

Amount of contribution (\$)  
  
\$3,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Senior Advisor

Employer (See Instructions)  
GM

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 74/117 Report: 76/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/08/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Montgomery, Stephen

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of  
contribution (\$) \$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Vice President

10 Employer (See Instructions)  
OZ Systems

Date  
  
09/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moore, Iris

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Homemaker

Employer (See Instructions)  
None

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moore, Patrick

Contributor address; City; State; Zip Code  
Plano, TX 75093-4739

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moritz, John David

Contributor address; City; State; Zip Code  
Arlington, TX 76004-0490

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Car Dealer

Employer (See Instructions)  
Mortiz Cadillac

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mostyn Law Firm PC

Contributor address; City; State; Zip Code  
Houston, TX 77007-7004

Amount of  
contribution (\$) \$10,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 75/117 Report: 77/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Murrin, Steve

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76164-8219

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Real Estate

10 Employer (See Instructions)  
Self

Date  
  
08/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Myers, Richard

Contributor address; City; State; Zip Code  
Dallas, TX 75230-5130

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate Development Company

Employer (See Instructions)  
Realty Capital Corporation

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nelson, Jonathan

Contributor address; City; State; Zip Code  
Arlington, TX 76013-1705

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
08/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Newman, Clarke

Contributor address; City; State; Zip Code  
Dallas, TX 75201-7492

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Doctor of Optometry

Employer (See Instructions)  
Self

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Newman, Clarke

Contributor address; City; State; Zip Code  
Dallas, TX 75201-7492

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Doctor of Optometry

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 76/117 Report: 78/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nixon, Charles

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Architect

10 Employer (See Instructions)  
Jacobs

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nolan, John

Contributor address; City; State; Zip Code  
Arlington, TX 76015

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Noteboom, Charles

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2798

Amount of contribution (\$)  
  
\$222.22

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nyfeler, John

Contributor address; City; State; Zip Code  
Austin, TX 78701-1701

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
The Nyfeler Organization

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oakley, Keith

Contributor address; City; State; Zip Code  
Austin, TX 78701-3726

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Lobbyist

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 77/117 Report: 79/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oliver, James

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2244

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
General Manager

10 Employer (See Instructions)  
Tarrant Regional Water District

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oudt, John

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1540

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Oudt, Kyle

Contributor address; City; State; Zip Code  
Dallas, TX 75209-3531

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Acquisitions

Employer (See Instructions)  
INCAP Fund

Date  
  
07/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pacheco, Mark

Contributor address; City; State; Zip Code  
Allen, TX 75013-5478

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Pacheco Koch

Date  
  
12/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pack, Sam

Contributor address; City; State; Zip Code  
Carrollton, TX 75011

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Car Dealer

Employer (See Instructions)  
Sam Pack Auto Group

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 78/117 Report: 80/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/07/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Palko, Mary

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

7 Amount of contribution (\$)  
  
\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Investor

10 Employer (See Instructions)  
Self

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Parham, Randy

Contributor address; City; State; Zip Code  
Fort Worth, TX 76104

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Dentist

Employer (See Instructions)  
Self

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Parker, Brad

Contributor address; City; State; Zip Code  
Bedford, TX 76021-3537

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
The Parker Law Firm

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Parker, Jordan

Contributor address; City; State; Zip Code  
Fort Worth, TX 76116

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger LLP

Date  
  
07/16/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
PBSJ Corporation PAC

Contributor address; City; State; Zip Code  
Tampa, FL 33607

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 79/117 Report: 81/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pedersen, Bob

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
CPA

10 Employer (See Instructions)  
self

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Peisen, Val

Contributor address; City; State; Zip Code  
McAllen, TX 78501-9160

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Beer Distributor

Employer (See Instructions)  
L & F Distributors

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pena, Lucilo

Contributor address; City; State; Zip Code  
Dallas, TX 75201

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Architect/Developer

Employer (See Instructions)  
Billingsley Development Co.

Date  
  
10/22/2010

Full name of contributor ☒ out-of-state PAC (ID# C00039321)  
PepsiCo Concerned Citizens Fund

Contributor address; City; State; Zip Code  
Plano, TX 75024-4002

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perdue Brackett Flores Utt & Burns JV

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-5111

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 80/117 Report: 82/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/08/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perdue Brandon Fielder Collins & Mott LLP

6 Contributor address; City; State; Zip Code  
Lubbock, TX 79408-0817

7 Amount of  
contribution (\$) \$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perez, Linda

09/07/2010

Contributor address; City; State; Zip Code  
Floresville, TX 78114-4109

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Rancher

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perot, H.R. Jr.

08/13/2010

Contributor address; City; State; Zip Code  
Plano, TX 75026

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perry, Lynne

09/10/2010

Contributor address; City; State; Zip Code  
San Antonio, TX 78217-1873

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Financial Advisor

Employer (See Instructions)  
Merrill Lynch

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Petrohawk Energy PAC

12/02/2010

Contributor address; City; State; Zip Code  
Houston, TX 77002-5038

Amount of  
contribution (\$) \$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 81/117 Report: 83/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pettit, David

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-2422

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
CONSULTANT

10 Employer (See Instructions)  
GIDEON TOAL

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Petty, Edwin

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2744

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Philpott, Peter

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Financial Consultant

Employer (See Instructions)  
Citi Smith Barney

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pigman, Reed Jr.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76106-2782

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Texas Jet

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pinnacle Anesthesia Consultants PA

Contributor address; City; State; Zip Code  
Dallas, TX 75240

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 82/117 Report: 84/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pinnelli, Janis

6 Contributor address; City; State; Zip Code  
Austin, TX 78763

7 Amount of  
contribution (\$)  
  
\$500.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Accountant

10 Employer (See Instructions)  
J. Pinnelli Company

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Polenz, Patricia

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of  
contribution (\$)  
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Self

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Polikov, Scott

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-2612

Amount of  
contribution (\$)  
  
\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Planner

Employer (See Instructions)  
Gateway Planning

Date  
  
11/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Polikov, Scott

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-2612

Amount of  
contribution (\$)  
  
\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Planner

Employer (See Instructions)  
Gateway Planning

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Political Action Committee of The Independent Insurance Agents  
Of Texas

Contributor address; City; State; Zip Code  
Austin, TX 78768

Amount of  
contribution (\$)  
  
\$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 83/117 Report: 85/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
  
12/02/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Political Action Committee of the Independent Insurance Agents Of Texas

**6** Contributor address; City; State; Zip Code  
Austin, TX 78768

**7** Amount of contribution (\$)  
  
\$500.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Political Action Committee of Winstead PC

11/19/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75270

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pope Hardwicke Christie Schell Kelly & Ray LLP

10/15/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-4929

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Popp Gray & Hutcheson LLP

11/19/2010

Contributor address; City; State; Zip Code  
Austin, TX 78746

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Powell, Victoria

09/13/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-6233

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Accounting/Consulting

Employer (See Instructions)  
B.R. Powell & Associates PC

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 84/117 Report: 86/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Prescott, Warren

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-6155

7 Amount of contribution (\$)  
  
\$480.00

8 In-kind contribution description (if applicable)  
Valet parking service

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
Rent A Frog Valet

Date  
  
12/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Provost Umphrey Law Firm LLP

Contributor address; City; State; Zip Code  
Beaumont, TX 77704-4905

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/11/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Purcell, Davis

Contributor address; City; State; Zip Code  
Fort Worth, TX 76104-2030

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Wells Purcell & Kratz

Date  
  
08/31/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Quesada, George Jr.

Contributor address; City; State; Zip Code  
Dallas, TX 75209-1901

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self-Employed

Date  
  
08/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Radford, Maggie

Contributor address; City; State; Zip Code  
Dallas, TX 75214

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CPA

Employer (See Instructions)  
Bonanza Oil Company

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 85/117 Report: 87/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
RadioShack Government Action Fund

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
RAMPAC

12/07/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75221-0239

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Raytheon Texas PAC

08/13/2010

Contributor address; City; State; Zip Code  
Garland, TX 75042

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Real Estate Council Community Leadership Committee

12/09/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75240-2667

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reaud, Reagan

12/08/2010

Contributor address; City; State; Zip Code  
Austin, TX 78703-4132

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 86/117 Report: 88/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reed, Gaye

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

7 Amount of  
contribution (\$) \$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Realtor

10 Employer (See Instructions)  
Coldwell Banker

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reilly, Mike

Contributor address; City; State; Zip Code  
Aledo, TX 76008

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate Investments

Employer (See Instructions)  
Reilly Brothers Property Co.

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reynolds, Fred

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1760

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Engineering Consultant

Employer (See Instructions)  
Fred Reynolds & Associates

Date  
  
07/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Riddick, Carol

Contributor address; City; State; Zip Code  
Dallas, TX 75225

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Riddick, Carol

Contributor address; City; State; Zip Code  
Dallas, TX 75225

Amount of  
contribution (\$) \$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 87/117 Report: 89/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rimmer, Roy Jr.

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76126-5440

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Owner

10 Employer (See Instructions)  
RNR Production Land and Cattle

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rizos, Dawn

Contributor address; City; State; Zip Code  
Dallas, TX 75205-2828

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Business owner

Employer (See Instructions)  
Self-employed

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Roach, Nelson

Contributor address; City; State; Zip Code  
Danigerfield, TX 75638-0000

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Roach, Paul

Contributor address; City; State; Zip Code  
Fort Worth, TX 76111-1360

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Senior Minister

Employer (See Instructions)  
Unity Church of Fort Worth

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Robert J. Myers & Associates

Contributor address; City; State; Zip Code  
Fort Worth, TX 76116-7157

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 88/117 Report: 90/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/13/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Roberts, Walter

6 Contributor address; City; State; Zip Code  
Dallas, TX 75208-2756

7 Amount of contribution (\$)  
  
\$2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
General Manager

10 Employer (See Instructions)  
Alba Security

Date  
  
09/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Roby, Norma

Contributor address; City; State; Zip Code  
Fort Worth, TX 76112-4419

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Concessions

Employer (See Instructions)  
Self-employed

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rogers, Lee

Contributor address; City; State; Zip Code  
Ft Worth, TX 76102-3263

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Advertising

Employer (See Instructions)  
The Rogers Group

Date  
  
08/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rogers, Mary Beth

Contributor address; City; State; Zip Code  
Dallas, TX 75229-6024

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Self

Date  
  
09/13/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rogers, Pollard

Contributor address; City; State; Zip Code  
Westworth Village, TX 76114-3544

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 89/117 Report: 91/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/20/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rosenthal, Brent

6 Contributor address; City; State; Zip Code  
Dallas, TX 75214

7 Amount of  
contribution (\$)   
  
\$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Baron & Budd

Date  
  
11/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ross, Thomas

Contributor address; City; State; Zip Code  
Arlington, TX 76016

Amount of  
contribution (\$)   
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rowland, Betty

Contributor address; City; State; Zip Code  
Fort Worth, TX 76123

Amount of  
contribution (\$)   
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rudy, Kirk

Contributor address; City; State; Zip Code  
Austin, TX 78703

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Endeavor Real Estate

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rush, Marvin

Contributor address; City; State; Zip Code  
San Antonio, TX 78265

Amount of  
contribution (\$)   
  
\$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Rush Enterprises

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 90/117 Report: 92/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/22/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ryan Texas PAC

6 Contributor address; City; State; Zip Code  
Dallas, TX 75240-5017

7 Amount of  
contribution (\$) \$2,500.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sanders, Betty

09/19/2010

Contributor address; City; State; Zip Code  
Colleyville, TX 76034

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Community Affairs

Employer (See Instructions)  
Bates Container Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sanders, Mark

09/28/2010

Contributor address; City; State; Zip Code  
Keller, TX 76262-8821

Amount of  
contribution (\$) \$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Bates Container

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Santos, Frank

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-5008

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consulting

Employer (See Instructions)  
Santos Alliances & Clients

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schenkkan, Pete

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-3790

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Graves Dougherty Hearon & Moody

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 91/117 Report: 93/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)

00062095

**4** Date  
  
09/24/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schneider, Cynthia

**6** Contributor address; City; State; Zip Code  
Dallas, TX 75220-2043

**7** Amount of contribution (\$)  
  
\$150.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)  
Physician

**10** Employer (See Instructions)  
Self

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schoenbaum, Alan

Contributor address; City; State; Zip Code  
San Antonio, TX 78209-4524

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Senior Vice President

Employer (See Instructions)  
Rackspace

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schwartz, A. R.

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schwarz, Kurt

Contributor address; City; State; Zip Code  
Dallas, TX 75206-6234

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Jackson Walker

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scott, Alan

Contributor address; City; State; Zip Code  
Avon, OH 44011

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 92/117 Report: 94/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scott, Donald

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109-2744

7 Amount of  
contribution (\$)   
  
\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retired

10 Employer (See Instructions)  
Townsite Co.

Date  
  
10/05/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Segal, Andrew

Contributor address; City; State; Zip Code  
Houston, TX 77024-3928

Amount of  
contribution (\$)   
  
\$5,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
Boxer Property

Date  
  
10/15/2010

Full name of contributor ☒ out-of-state PAC (ID# C00004036)  
SEIU C.O.P.E.

Contributor address; City; State; Zip Code  
Washington, DC 20036

Amount of  
contribution (\$)   
  
\$1,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
09/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shaw, James

Contributor address; City; State; Zip Code  
San Antonio, TX 78209-5947

Amount of  
contribution (\$)   
  
\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Carabin Shaw

Date  
  
09/24/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shaw, James

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of  
contribution (\$)   
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 93/117 Report: 95/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
07/15/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sheets, Jody

6 Contributor address; City; State; Zip Code  
Dallas, TX 75219-5221

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Self

Date  
  
09/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shivers, Nancy

Contributor address; City; State; Zip Code  
San Antonio, TX 78210

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Shivers & Shivers

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shrestha, Dazzle

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-3006

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Chiropractor

Employer (See Instructions)  
Eastside Chiropractic

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Siy, Linda

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Physician

Employer (See Instructions)  
UNTHSC

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smart, Samuel III

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 94/117 Report: 96/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/18/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, James

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

7 Amount of  
contribution (\$) \$200.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Retired

10 Employer (See Instructions)  
Retired

Date  
  
08/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Mark

Contributor address; City; State; Zip Code  
Dallas, TX 75380-3029

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Smith Protective Services

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Mark

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-1756

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Geologist

Employer (See Instructions)  
M.E. Operating

Date  
  
10/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smothers, Patricia

Contributor address; City; State; Zip Code  
San Antonio, TX 78209-5912

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
Self

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sohmer, Seymour

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1079

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive Director

Employer (See Instructions)  
BRIT



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 95/117 Report: 97/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
07/14/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Solana, Nancy

6 Contributor address; City; State; Zip Code  
Dallas, TX 75205-2053

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Grant Making

10 Employer (See Instructions)  
Bonanza Oil Co.

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Southwest Tow Operators PAC

Contributor address; City; State; Zip Code  
Dallas, TX 75234-7329

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
11/30/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stacy, Tom

Contributor address; City; State; Zip Code  
Austin, TX 78701-2401

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
commercial real estate

Employer (See Instructions)  
T. Stacy & Associates Inc.

Date  
  
10/15/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stanford, Carol

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-1709

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)  
Stanford Company

Date  
  
09/06/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
State COPE Fund (Texas AFL-CIO)

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 96/117 Report: 98/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stein, Jerry

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76123-1943

7 Amount of contribution (\$)  
  
\$200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Scientist

10 Employer (See Instructions)  
Alcon Laboratories

Date  
  
12/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stelmas, Mark

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stephens Anderson & Cummings LLP

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stevenson, John

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1521

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investments

Employer (See Instructions)  
Keystone Group LP

Date  
  
07/14/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stewart, Annette

Contributor address; City; State; Zip Code  
Dallas, TX 75208-3031

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 97/117 Report: 99/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/29/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stewart, Elizabeth

6 Contributor address; City; State; Zip Code  
Austin, TX 78731

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Co-Founder

10 Employer (See Instructions)  
GSD&M

Date  
  
09/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Stocker, C.W. III

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132-4542

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Texas International Energy Partners

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Street, Mary Lou

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-1534

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Elderly Care

Employer (See Instructions)  
Self

Date  
  
11/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sturzl, Frank

Contributor address; City; State; Zip Code  
Austin, TX 78734-5207

Amount of contribution (\$)  
  
\$750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Legislative Consultant

Employer (See Instructions)  
HillCo Partners

Date  
  
08/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Swartz, Lynn

Contributor address; City; State; Zip Code  
Fort Worth, TX 76034

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
EMS Executive

Employer (See Instructions)  
CareFlite

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 98/117 Report: 100/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
11/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taraborelli, Jennie

6 Contributor address; City; State; Zip Code  
Conroe, TX 77301-2820

7 Amount of contribution (\$)  
  
\$3,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Partner

10 Employer (See Instructions)  
Pate Transportation Partners

Date  
  
10/12/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TAROPAC

Contributor address; City; State; Zip Code  
Dallas, TX 75204

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Tim

Contributor address; City; State; Zip Code  
Austin, TX 78703-2942

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Jackson Walker

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TCRA F.A.I.R. PAC

Contributor address; City; State; Zip Code  
Athens, TX 75751

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
08/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Templin, Donald

Contributor address; City; State; Zip Code  
Dallas, TX 75230-4027

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Haynes and Boone LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 99/117 Report: 101/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
  
12/02/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texans For Economic Development (PAC)

**6** Contributor address; City; State; Zip Code  
Austin, TX 78701

**7** Amount of contribution (\$)  
  
\$10,000.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas AFT Committee on Political Education

12/09/2010

Contributor address; City; State; Zip Code  
Austin, TX 78704

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Ambulatory Surgery Center Society PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-1668

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Apartment Association PAC

10/12/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$3,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Association of Health Underwriters PAC

10/22/2010

Contributor address; City; State; Zip Code  
Duncanville, TX 75137

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 100/117 Report: 102/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Association of Realtors TREPAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78768-2246

7 Amount of contribution (\$)  
  
\$5,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Chiropractic Association PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-2132

Amount of contribution (\$)  
  
\$1,800.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Community Associations Institute Legislative Action Committee PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-2165

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Construction Association PAC

12/09/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Consumer Finance Association PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 101/117 Report: 103/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Credit Union League PAC

6 Contributor address; City; State; Zip Code  
Dallas, TX 75265-5147

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Deer Association PAC

09/14/2010

Contributor address; City; State; Zip Code  
San Antonio, TX 78216-4662

Amount of contribution (\$)  
  
\$750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Events PAC

10/22/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas League of Conservation Voters Political Committee

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-4385

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Municipal Police Association PAC (TMPA PAC)

10/22/2010

Contributor address; City; State; Zip Code  
Austin, TX 78768

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 102/117 Report: 104/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/31/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Optometric PAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78701

7 Amount of contribution (\$)  
  
\$2,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Osteopathic Medical Association PAC

10/22/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Podiatric Medical PAC

10/22/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-2342

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Quarter Horse Association PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78757-1446

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Radiological Society PAC

10/29/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-1670

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #

Schedule: 103/117 Report: 105/212

**2** FILER NAME Davis, Wendy R.

**3** ACCOUNT # (Ethics Commission filers)  
00062095

**4** Date  
  
12/11/2010

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Rental Association PAC

**6** Contributor address; City; State; Zip Code  
Austin, TX 78703

**7** Amount of contribution (\$)  
  
\$1,000.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date  
  
10/29/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Society Of Certified Public Accountants PAC

Contributor address; City; State; Zip Code  
Dallas, TX 75254-7408

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas State Assn of Fire Fighters Action Committee

Contributor address; City; State; Zip Code  
Austin, TX 78745

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas State Teachers Assn PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701-1815

Amount of contribution (\$)  
  
\$3,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Trial Lawyer Association PAC

Contributor address; City; State; Zip Code  
Austin, TX 78767-0788

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 104/117 Report: 106/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
08/03/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas United Auto Workers CAP Voluntary Fund

6 Contributor address; City; State; Zip Code  
Dallas, TX 75247-6901

7 Amount of  
contribution (\$) \$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Veterinary Medical Association PAC

08/30/2010

Contributor address; City; State; Zip Code  
Austin, TX 78754-5239

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TEXPAC

11/19/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of  
contribution (\$) \$5,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TGA PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701-2488

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
The Law Offices of Frank L. Branson P.C

10/15/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75205-4185

Amount of  
contribution (\$) \$2,500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 105/117 Report: 107/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
The Law Offices Of Randall D. Moore PLLC

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76102-3407

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thistlewaite, Randi

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Community Volunteer

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thompson, Douglas Jr.

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Vice President

Employer (See Instructions)  
Yates Construction

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thompson, George

09/28/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Accountant

Employer (See Instructions)  
Altaras Thompson PC

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tigue, Virginia

11/05/2010

Contributor address; City; State; Zip Code  
Colleyville, TX 76034

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 106/117 Report: 108/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Titus, Jean Ann

6 Contributor address; City; State; Zip Code  
Dallas, TX 75205-3128

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Toal, James

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76114-4336

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Gideon Toal Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Townes, Ralph Jr.

12/02/2010

Contributor address; City; State; Zip Code  
Corsicana, TX 75110

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Sr. Vice President

Employer (See Instructions)  
Glazer's Distributors

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tracy, David

11/05/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Trask, Patrick

12/01/2010

Contributor address; City; State; Zip Code  
Houston, TX 77019-6212

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Director

Employer (See Instructions)  
Wood Partners

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 107/117 Report: 109/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/19/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Trevino, T. Oscar

6 Contributor address; City; State; Zip Code  
North Richland Hills, TX 76182-9238

7 Amount of contribution (\$)  
  
\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
O. Trevino Construction

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TSA PAC

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
12/09/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tubb, Larry

Contributor address; City; State; Zip Code  
Fort Worth, TX 76132

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Health Care Executive

Employer (See Instructions)  
Cook Children's Health Care System

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tucker, William

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Turrieta, Gilbert

Contributor address; City; State; Zip Code  
Austin, TX 78701-2132

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Legislative Consultant

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 108/117 Report: 110/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TWI - PAC

6 Contributor address; City; State; Zip Code  
Dallas, TX 75238

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
TX State Council of Machinists and Aerospace Worke

10/01/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76108-1838

Amount of contribution (\$)  
  
\$750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ulman, Doug

12/08/2010

Contributor address; City; State; Zip Code  
Austin, TX 78704-3235

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President/CEO

Employer (See Instructions)  
LAF

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Union Pacific Corporation Fund For Effective Gover

10/22/2010

Contributor address; City; State; Zip Code  
Washington, DC 20005

Amount of contribution (\$)  
  
\$2,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☒ out-of-state PAC (ID# C00064766)  
UPS PAC

07/15/2010

Contributor address; City; State; Zip Code  
Atlanta, GA 30328

Amount of contribution (\$)  
  
\$2,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 109/117 Report: 111/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
USAA Employee PAC

6 Contributor address; City; State; Zip Code  
San Antonio, TX 78288-0001

7 Amount of contribution (\$)  
  
\$2,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
UTU PAC

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Valdez, Jerry

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78711-2031

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultants

Employer (See Instructions)  
Governmental Affairs LLC

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Vann, Robert II

10/12/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76185-0412

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Vantex Enterprises LLC

12/09/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75220-2443

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 110/117 Report: 112/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)

00062095

4 Date  
  
10/01/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
VATAT - PAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78701-1908

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Veach, Coy

09/15/2010

Contributor address; City; State; Zip Code  
Burleson, TX 76028-3223

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Engineer / Construction Manager

Employer (See Instructions)  
Freese and Nichols

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Vendigm Construction LLC

10/26/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76112-6528

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Veterans & Civilians Brain Injury Advocates (PAC)

12/09/2010

Contributor address; City; State; Zip Code  
Austin, TX 78746

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Vogel, Carlela

09/29/2010

Contributor address; City; State; Zip Code  
Lakeside, TX 76108-9475

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
3783Health & Human Services Consultant

Employer (See Instructions)  
Self-employed



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 111/117 Report: 113/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Vogel, Carlela

6 Contributor address; City; State; Zip Code  
Lakeside, TX 76108-9475

7 Amount of contribution (\$)  
  
\$25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Health & Human Services Consultant

10 Employer (See Instructions)  
Self-employed

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Volcansek, Mary

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
TCU

Date  
  
12/02/2010

Full name of contributor ☒ out-of-state PAC (ID# C00093054)  
Wal-Mart Stores PAC

Contributor address; City; State; Zip Code  
Bentonville, AR 72716-6299

Amount of contribution (\$)  
  
\$1,500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Walker, Kathleen

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Waller, Clifford

Contributor address; City; State; Zip Code  
San Antonio, TX 78212-7821

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 112/117 Report: 114/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/11/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wallis, Rusty

6 Contributor address; City; State; Zip Code  
Heath, TX 75032

7 Amount of contribution (\$)  
  
\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Owner

10 Employer (See Instructions)  
Rusty Wallace Honda/VW

Date  
  
07/16/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Waters, C. Andrew

Contributor address; City; State; Zip Code  
Dallas, TX 75225-4834

Amount of contribution (\$)  
  
\$5,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Waters & Kraus L.L.P.

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Watson, Libby

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
10/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Watterson, Ralph

Contributor address; City; State; Zip Code  
Fort Worth, TX 76110-1448

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Old Home Supply

Date  
  
12/02/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Weaver and Tidwell L.L.P.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 113/117 Report: 115/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Weber, John

6 Contributor address; City; State; Zip Code  
Dallas, TX 75248

7 Amount of  
contribution (\$)  
  
\$1,000.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Executive Vice President

10 Employer (See Instructions)  
Weber & Company

Date  
  
09/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Weir Vale, Kathleen

Contributor address; City; State; Zip Code  
San Antonio, TX 78207

Amount of  
contribution (\$)  
  
\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
CEO

Employer (See Instructions)  
Hope Medical Supply

Date  
  
09/28/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
West, Robert

Contributor address; City; State; Zip Code  
Fort Worth, TX 76116

Amount of  
contribution (\$)  
  
\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Whitaker Chalk Law Firm

Date  
  
08/03/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
White, Deborah

Contributor address; City; State; Zip Code  
San Antonio, TX 78248

Amount of  
contribution (\$)  
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Requested

Employer (See Instructions)  
Self

Date  
  
09/10/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whittemore, Alison

Contributor address; City; State; Zip Code  
San Antonio, TX 78209-6047

Amount of  
contribution (\$)  
  
\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
professor

Employer (See Instructions)  
University of the Incarnate Word

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 114/117 Report: 116/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
12/02/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wholesale Beer Distributors of Texas PAC

6 Contributor address; City; State; Zip Code  
Austin, TX 78701

7 Amount of contribution (\$)  
  
\$1,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wilcox, Susan

09/28/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107-9312

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
VP Finance

Employer (See Instructions)  
YMCA

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wilkie, Valleau Jr.

09/24/2010

Contributor address; City; State; Zip Code  
Fort Worth, TX 76102

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wilkins, Lee

11/01/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75230-2868

Amount of contribution (\$)  
  
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Cantey Hanger

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Abigail

09/07/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75209

Amount of contribution (\$)  
  
\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)  
GS & Co.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 115/117 Report: 117/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
09/28/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Martha

6 Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

7 Amount of contribution (\$)  
  
\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Real Estate

10 Employer (See Instructions)  
Williams Trew

Date  
  
10/01/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Thomas

Contributor address; City; State; Zip Code  
Fort Worth, TX 76109

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Haynes and Boone LLP

Date  
  
09/19/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Willis, Doyle Jr.

Contributor address; City; State; Zip Code  
Fort Worth, TX 76111-1421

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
  
12/08/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Winkelman, Marc

Contributor address; City; State; Zip Code  
West Lake Hills, TX 78746-5491

Amount of contribution (\$)  
  
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Executive

Employer (See Instructions)  
Calendar Club

Date  
  
10/07/2010

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Witcher, Carol

Contributor address; City; State; Zip Code  
Fort Worth, TX 76107

Amount of contribution (\$)  
  
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Witcher Properties

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 116/117 Report: 118/212

2 FILER NAME Davis, Wendy R.

3 ACCOUNT # (Ethics Commission filers)  
00062095

4 Date  
  
10/12/2010

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wittenburg & Associates LLC

6 Contributor address; City; State; Zip Code  
Austin, TX 78701

7 Amount of  
contribution (\$) \$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Woods, Lee

12/02/2010

Contributor address; City; State; Zip Code  
Austin, TX 78701

Amount of  
contribution (\$) \$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wynne, Shannon

07/16/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75205

Amount of  
contribution (\$) \$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Eight-O Management

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Yellen, Jonathan

08/19/2010

Contributor address; City; State; Zip Code  
Dallas, TX 75229-5559

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Felcor Lodging

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Yerly, Rebecca

11/22/2010

Contributor address; City; State; Zip Code  
Austin, TX 78704-2502

Amount of  
contribution (\$) \$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Researcher

Employer (See Instructions)  
TXP Inc.

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 117/117 Report: 119/212

**2** FILER NAME Davis, Wendy R.**3** ACCOUNT # (Ethics Commission filers)

00062095

**4** Date  
  
10/22/2010**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Zachry, H. B. Jr.**6** Contributor address; City; State; Zip Code  
San Antonio, TX 78205-3140**7** Amount of  
contribution (\$)  
  
\$2,500.00**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)  
Chairman of the Board**10** Employer (See Instructions)  
Zachry ConstructionDate  
  
10/22/2010Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Zachry Construction Corporation PACContributor address; City; State; Zip Code  
San Antonio, TX 78265-3240Amount of  
contribution (\$)  
  
\$1,000.00In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 1/87 Report: 120/212                   |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/07/2010   | <b>5</b> Payee name<br>All Points Capital Corp  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$1,363.29                                  | <b>7</b> Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                              |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/20/2010  | Payee name<br>All Points Capital Corp   |  |   |   |              |
| Amount (\$)<br>\$1,363.29   | Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                                       |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>08/25/2010  | Payee name<br>All Points Capital Corp   |  |   |   |              |
| Amount (\$)<br>\$1,431.46   | Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                                       |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/29/2010  | Payee name<br>All Points Capital Corp   |  |   |   |              |
| Amount (\$)<br>\$1,363.29   | Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                                       |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 2/87 Report: 121/212                   |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/29/2010   | <b>5</b> Payee name<br>All Points Capital Corp  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$1,363.29                                  | <b>7</b> Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                              |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/29/2010  | Payee name<br>All Points Capital Corp   |  |   |   |              |
| Amount (\$)<br>\$1,431.46   | Payee address City; State; Zip Code<br>275 Broadhollow Rd<br>Melville, NY 11747                                       |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder car lease            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/17/2010  | Payee name<br>Alliance Regional Newspapers  |  |   |   |              |
| Amount (\$)<br>\$200.00   | Payee address City; State; Zip Code<br>P.O. Box 272<br>Colleyville, TX 76034  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Subscriptions for office          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/12/2010  | Payee name<br>AlphaGraphics   |  |   |   |              |
| Amount (\$)<br>\$219.39   | Payee address City; State; Zip Code<br>5836 Camp Bowie Blvd<br>Fort Worth, TX 76107                                   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political event signage           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |   |   |              |
|--|---|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 3/87 Report: 122/212            |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT #</b> (TEC filers)<br>00062095 |              |
| <b>4 Date</b><br>11/22/2010                                  | <b>5 Payee name</b><br>American Airlines  |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$153.70                             | <b>7 Payee address</b> City; State; Zip Code<br>P.O. Box 619612 MD 2400<br>DFW Airport, TX 75261-9612 |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Travel Out of District     |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Staff airfare DFW to Austin      |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>08/02/2010                                    | <b>Payee name</b><br>American Express   |  |   |   |              |
| <b>Amount (\$)</b><br>\$4.95                                 | <b>Payee address</b> City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>08/05/2010                                    | <b>Payee name</b><br>American Express   |  |   |   |              |
| <b>Amount (\$)</b><br>\$36.81                                | <b>Payee address</b> City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>09/01/2010                                    | <b>Payee name</b><br>American Express   |  |   |   |              |
| <b>Amount (\$)</b><br>\$4.95                                 | <b>Payee address</b> City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 4/87 Report: 123/212                   |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/07/2010   | <b>5</b> Payee name<br>American Express   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$90.97                                     | <b>7</b> Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878           |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/04/2010  | Payee name<br>American Express  |  |  |   |              |
| Amount (\$)<br>\$4.95   | Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/05/2010  | Payee name<br>American Express  |  |  |   |              |
| Amount (\$)<br>\$138.76   | Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/02/2010  | Payee name<br>American Express  |  |  |   |              |
| Amount (\$)<br>\$4.95   | Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 5/87 Report: 124/212                   |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/05/2010   | <b>5</b> Payee name<br>American Express   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$215.12                                    | <b>7</b> Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878           |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/01/2010  | Payee name<br>American Express  |  |  |   |              |
| Amount (\$)<br>\$4.95   | Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                    |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/06/2010  | Payee name<br>American Express  |  |  |   |              |
| Amount (\$)<br>\$82.51  | Payee address City; State; Zip Code<br>PO Box 2878<br>Omaha, NE 68103-2878                    |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/07/2010  | Payee name<br>AMM Political Strategies LLC  |  |  |   |              |
| Amount (\$)<br>\$3,000.00   | Payee address City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111                |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Consulting Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services                          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 6/87 Report: 125/212 |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00062095 |  |
| <b>4 Date</b><br>07/07/2010                       | <b>5 Payee name</b><br>AMM Political Strategies LLC  |  |  |   |  |
| <b>6 Amount (\$)</b><br>\$3,000.00                | <b>7 Payee address</b> City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111  |  |  |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                   | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Consulting Expense  |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services |   |  |
|   | <div style="display: flex; justify-content: space-between;"> <div><b>9 Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div> |  |  |   |  |
| <b>Date</b><br>07/07/2010                         | <b>Payee name</b><br>AMM Political Strategies LLC  |  |  |   |  |
| <b>Amount (\$)</b><br>\$239.52                    | <b>Payee address</b> City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                     | <b>Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political website hosting         |   |  |
|   | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |
| <b>Date</b><br>07/07/2010                         | <b>Payee name</b><br>AMM Political Strategies LLC  |  |  |   |  |
| <b>Amount (\$)</b><br>\$3,000.00                  | <b>Payee address</b> City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                     | <b>Category</b> (See Categories listed at the top of this schedule)<br>Consulting Expense  |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services     |   |  |
|   | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |
| <b>Date</b><br>07/07/2010                         | <b>Payee name</b><br>AMM Political Strategies LLC  |  |  |   |  |
| <b>Amount (\$)</b><br>\$3,000.00                  | <b>Payee address</b> City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                     | <b>Category</b> (See Categories listed at the top of this schedule)<br>Consulting Expense  |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services     |   |  |
|   | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 7/87 Report: 126/212                   |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/25/2010   | <b>5</b> Payee name<br>AMM Political Strategies LLC  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$3,000.00                                  | <b>7</b> Payee address City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111          |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense    |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>AMM Political Strategies LLC   |  |  |   |              |
| Amount (\$)<br>\$235.80   | Payee address City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111                   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Phone calls for event                    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>AMM Political Strategies LLC   |  |  |   |              |
| Amount (\$)<br>\$3,000.00   | Payee address City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111                   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Consulting Expense               |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>AMM Political Strategies LLC   |  |  |   |              |
| Amount (\$)<br>\$3,000.00   | Payee address City; State; Zip Code<br>507 N. Sylvania<br>Fort Worth, TX 76111                   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Consulting Expense               |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political consulting services            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |
|---|--|--|---|---|
| <b>1</b> PAGE #<br>Schedule: 8/87 Report: 127/212                   |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>12/01/2010   | <b>5</b> Payee name<br>Annie's List  |  |   |   |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 699<br>Mr. Robert Jones<br>Austin, TX 78767   |  |   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political contribution |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>07/15/2010  | Payee name<br>Arbour, Laura  |  |   |   |
| Amount (\$)<br>\$1,291.40   | Payee address City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107   |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                           |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>07/29/2010  | Payee name<br>Arbour, Laura  |  |   |   |
| Amount (\$)<br>\$1,291.40   | Payee address City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107   |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                           |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>08/15/2010  | Payee name<br>Arbour, Laura  |  |   |   |
| Amount (\$)<br>\$1,291.40   | Payee address City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107   |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                           |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 9/87 Report: 128/212 |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |  |
|---|--|--|--|---|--|

  

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| <b>4 Date</b><br>08/26/2010  | <b>5 Payee name</b><br>Arbour, Laura   |  |  |              |
| <b>6 Amount (\$)</b><br>\$1,291.40   | <b>7 Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107  |  |  |              |
| <b>8 PURPOSE OF EXPENDITURE</b>  | <table style="width: 100%;"> <tr> <td style="width: 50%;"> <b>(a) Category</b> (See Categories listed at the top of this schedule)<br/>           Salaries/Wages/Contract Labor         </td> <td style="width: 50%;"> <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br/>           Payroll         </td> </tr> </table> | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |              |
| <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll   |  |  |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b>   | <table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought:</td> <td style="width: 33%;">Office held:</td> </tr> </table>  | Candidate / Officeholder name  | Office sought:   | Office held: |
| Candidate / Officeholder name  | Office sought:   | Office held:   |  |              |

  

|   |  |   |   |              |
|---|--|---|---|--------------|
| <b>Date</b><br>09/15/2010   | <b>Payee name</b><br>Arbour, Laura   |   |   |              |
| <b>Amount (\$)</b><br>\$1,291.40  | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>   | <table style="width: 100%;"> <tr> <td style="width: 50%;">           Category (See Categories listed at the top of this schedule)<br/>           Salaries/Wages/Contract Labor         </td> <td style="width: 50%;">           Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br/>           Payroll         </td> </tr> </table> | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |              |
| Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll  |   |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>                                    | <table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought:</td> <td style="width: 33%;">Office held:</td> </tr> </table>  | Candidate / Officeholder name   | Office sought:  | Office held: |
| Candidate / Officeholder name   | Office sought:   | Office held:  |   |              |

  

|   |  |   |   |              |
|---|--|---|---|--------------|
| <b>Date</b><br>09/30/2010   | <b>Payee name</b><br>Arbour, Laura   |   |   |              |
| <b>Amount (\$)</b><br>\$1,291.40  | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>   | <table style="width: 100%;"> <tr> <td style="width: 50%;">           Category (See Categories listed at the top of this schedule)<br/>           Salaries/Wages/Contract Labor         </td> <td style="width: 50%;">           Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br/>           Payroll         </td> </tr> </table> | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |              |
| Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll  |   |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>                                    | <table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought:</td> <td style="width: 33%;">Office held:</td> </tr> </table>  | Candidate / Officeholder name   | Office sought:  | Office held: |
| Candidate / Officeholder name   | Office sought:   | Office held:  |   |              |

  

|   |  |   |   |              |
|---|--|---|---|--------------|
| <b>Date</b><br>10/15/2010   | <b>Payee name</b><br>Arbour, Laura   |   |   |              |
| <b>Amount (\$)</b><br>\$1,291.40  | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>   | <table style="width: 100%;"> <tr> <td style="width: 50%;">           Category (See Categories listed at the top of this schedule)<br/>           Salaries/Wages/Contract Labor         </td> <td style="width: 50%;">           Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br/>           Payroll         </td> </tr> </table> | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |              |
| Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll  |   |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>                                    | <table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought:</td> <td style="width: 33%;">Office held:</td> </tr> </table>  | Candidate / Officeholder name   | Office sought:  | Office held: |
| Candidate / Officeholder name   | Office sought:   | Office held:  |   |              |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |              |
|--|--|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 10/87 Report: 129/212           |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>10/29/2010                                  | <b>5 Payee name</b><br>Arbour, Laura   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$1,291.40                           | <b>7 Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107                |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll       |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/15/2010                                    | <b>Payee name</b><br>Arbour, Laura   |  |  |   |              |
| <b>Amount (\$)</b><br>\$1,291.40                             | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                  |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/30/2010                                    | <b>Payee name</b><br>Arbour, Laura   |  |  |   |              |
| <b>Amount (\$)</b><br>\$1,291.40                             | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                  |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>12/08/2010                                    | <b>Payee name</b><br>Arbour, Laura   |  |  |   |              |
| <b>Amount (\$)</b><br>\$193.00                               | <b>Payee address</b> City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Travel Out of District                   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Mileage Ft. Worth/Austin |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 11/87 Report: 130/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>12/15/2010   | <b>5</b> Payee name<br>Arbour, Laura  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$1,291.40                                  | <b>7</b> Payee address City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                      |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Arbour, Laura   |  |  |   |              |
| Amount (\$)<br>\$1,291.40   | Payee address City; State; Zip Code<br>4520 Birchman Ave<br>Fort Worth, TX 76107  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/25/2010  | Payee name<br>Arlington Chamber of Commerce   |  |  |   |              |
| Amount (\$)<br>\$120.00   | Payee address City; State; Zip Code<br>505 East Border St<br>Arlington, TX 76010  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets      |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Arlington Chamber of Commerce   |  |  |   |              |
| Amount (\$)<br>\$25.00  | Payee address City; State; Zip Code<br>505 East Border St<br>Arlington, TX 76010  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event ticket       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 12/87 Report: 131/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/16/2010   | <b>5</b> Payee name<br>Arlington Life Shelter  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address City; State; Zip Code<br>325 W Division St<br>Ms. Becky Orander<br>Arlington, TX 76011-7415                                       |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation           |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>Arlington Life Shelter   |  |   |   |              |
| Amount (\$)<br>\$150.00   | Payee address City; State; Zip Code<br>325 W Division St<br>Ms. Becky Orander<br>Arlington, TX 76011-7415  |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets                 |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>Ashton   |  |   |   |              |
| Amount (\$)<br>\$81.19  | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>Ashton   |  |   |   |              |
| Amount (\$)<br>\$2,744.80   | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 13/87 Report: 132/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/20/2010   | <b>5</b> Payee name<br>Ashton   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$2,744.00                                  | <b>7</b> Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                       |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/20/2010  | Payee name<br>Ashton  |  |   |   |              |
| Amount (\$)<br>\$81.19  | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                                |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin         |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/01/2010  | Payee name<br>Ashton  |  |   |   |              |
| Amount (\$)<br>\$2,744.80   | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                                |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/01/2010  | Payee name<br>Ashton  |  |   |   |              |
| Amount (\$)<br>\$81.19  | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                                |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin         |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 14/87 Report: 133/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>09/29/2010                                  | <b>5 Payee name</b><br>Ashton   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$81.19                              | <b>7 Payee address</b> City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                       |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>09/29/2010                                    | <b>Payee name</b><br>Ashton   |  |  |   |              |
| <b>Amount (\$)</b><br>\$2,744.80                             | <b>Payee address</b> City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin               |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/15/2010                                    | <b>Payee name</b><br>Ashton   |  |  |   |              |
| <b>Amount (\$)</b><br>\$684.00                               | <b>Payee address</b> City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin               |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/03/2010                                    | <b>Payee name</b><br>Ashton   |  |  |   |              |
| <b>Amount (\$)</b><br>\$3,316.00                             | <b>Payee address</b> City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin               |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 15/87 Report: 134/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/03/2010   | <b>5</b> Payee name<br>Ashton   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$81.19                                     | <b>7</b> Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                       |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>Ashton  |  |  |   |              |
| Amount (\$)<br>\$571.20   | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                                |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rent - Austin               |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>Ashton  |  |  |   |              |
| Amount (\$)<br>\$81.19  | Payee address City; State; Zip Code<br>101 Colorado St<br>Austin, TX 78701                                |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder parking - Austin            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$795.37   | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                        |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 16/87 Report: 135/212 |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00062095 |  |
| <b>4 Date</b><br>07/01/2010                        | <b>5 Payee name</b><br>AT&T  |  |  |   |  |
| <b>6 Amount (\$)</b><br>\$398.24                   | <b>7 Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                                |  |  |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                    | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense              |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service |   |  |
|  | <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> Candidate / Officeholder name Office sought: Office held: |  |  |   |  |
| <b>Date</b><br>07/07/2010                          | <b>Payee name</b><br>AT&T  |  |  |   |  |
| <b>Amount (\$)</b><br>\$76.24                      | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                                  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                         |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:          |  |  |   |  |
| <b>Date</b><br>07/07/2010                          | <b>Payee name</b><br>AT&T  |  |  |   |  |
| <b>Amount (\$)</b><br>\$72.46                      | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                                  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                         |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:          |  |  |   |  |
| <b>Date</b><br>07/20/2010                          | <b>Payee name</b><br>AT&T  |  |  |   |  |
| <b>Amount (\$)</b><br>\$74.15                      | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                                  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                         |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:          |  |  |   |  |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |   |   |
|--|---|--|---|---|
| <b>1 PAGE #</b><br>Schedule: 17/87 Report: 136/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |
| <b>4 Date</b><br>07/20/2010                                  | <b>5 Payee name</b><br>AT&T   |  |   |   |
| <b>6 Amount (\$)</b><br>\$401.78                             | <b>7 Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                   |  |   |   |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone/internet service |   |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| <b>Date</b><br>08/06/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |
| <b>Amount (\$)</b><br>\$202.83                               | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                     |   |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| <b>Date</b><br>08/06/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |
| <b>Amount (\$)</b><br>\$74.95                                | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                     |   |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| <b>Date</b><br>08/25/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |
| <b>Amount (\$)</b><br>\$78.68                                | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                     |   |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |
|--|--|--|--|---|
| <b>1</b> PAGE #<br>Schedule: 18/87 Report: 137/212         |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>08/25/2010                                | <b>5</b> Payee name<br>AT&T  |  |  |   |
| <b>6</b> Amount (\$)<br>\$391.05                           | <b>7</b> Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254            |  |  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                            | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone/internet service |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>09/16/2010   | Payee name<br>AT&T   |  |  |   |
| Amount (\$)<br>\$391.26                                    | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |  |   |
| PURPOSE OF EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet phone service         |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>09/16/2010   | Payee name<br>AT&T   |  |  |   |
| Amount (\$)<br>\$74.25                                     | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |  |   |
| PURPOSE OF EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service              |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>09/27/2010   | Payee name<br>AT&T   |  |  |   |
| Amount (\$)<br>\$157.10                                    | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |  |   |
| PURPOSE OF EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service              |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 19/87 Report: 138/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/29/2010   | <b>5</b> Payee name<br>AT&T   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$73.73                                     | <b>7</b> Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$74.19  | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$209.71   | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$392.15   | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet telephone service   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |   |   |              |
|--|---|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 20/87 Report: 139/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>10/21/2010                                  | <b>5 Payee name</b><br>AT&T   |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$25.19                              | <b>7 Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                   |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone supplies |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>10/29/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |              |
| <b>Amount (\$)</b><br>\$73.62                                | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service             |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>10/29/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |              |
| <b>Amount (\$)</b><br>\$69.52                                | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Printing Expense                          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service             |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>11/19/2010                                    | <b>Payee name</b><br>AT&T   |  |   |   |              |
| <b>Amount (\$)</b><br>\$396.91                               | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet telephone service    |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 21/87 Report: 140/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>11/22/2010                                  | <b>5 Payee name</b><br>AT&T   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$153.98                             | <b>7 Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                   |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010   | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$25.00                                       | Payee address      City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/08/2010   | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$69.57                                       | Payee address      City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/08/2010   | Payee name<br>AT&T  |  |  |   |              |
| Amount (\$)<br>\$73.64                                       | Payee address      City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

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|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 22/87 Report: 141/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>12/16/2010                                  | <b>5 Payee name</b><br>AT&T   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$155.65                             | <b>7 Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                   |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>12/17/2010                                    | <b>Payee name</b><br>AT&T   |  |  |   |              |
| <b>Amount (\$)</b><br>\$396.21                               | <b>Payee address</b> City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                     |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone internet service   |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>12/07/2010                                    | <b>Payee name</b><br>Best Buy   |  |  |   |              |
| <b>Amount (\$)</b><br>\$216.49                               | <b>Payee address</b> City; State; Zip Code<br>4970 US Highway 290 West<br>Austin, TX 78735                |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Gift for Senate event        |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/01/2010                                    | <b>Payee name</b><br>Best Buy #234  |  |  |   |              |
| <b>Amount (\$)</b><br>\$86.59                                | <b>Payee address</b> City; State; Zip Code<br>6750 West Fwy.<br>Fort Worth, TX 76116                      |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Video software               |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 23/87 Report: 142/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/25/2010   | <b>5</b> Payee name<br>Bethlehem Baptist Church   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$200.00                                    | <b>7</b> Payee address City; State; Zip Code<br>1188 W. Broad Street<br>Mansfield, TX 76063   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Sponsorship donation |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/15/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$113.12   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/29/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$113.12   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/15/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$113.12   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 24/87 Report: 143/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/26/2010   | <b>5</b> Payee name<br>Blackman/AmCheck Payroll Services                                      |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$113.12                                    | <b>7</b> Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044  |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/15/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$127.95   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/30/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$131.47   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$126.11   | Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 25/87 Report: 144/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>10/29/2010                                  | <b>5 Payee name</b><br>Blackman/AmCheck Payroll Services                                      |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$126.11                             | <b>7 Payee address</b> City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044  |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/15/2010   | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$126.11                                      | Payee address      City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044      |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/30/2010   | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$126.11                                      | Payee address      City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044      |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/15/2010   | Payee name<br>Blackman/AmCheck Payroll Services   |  |  |   |              |
| Amount (\$)<br>\$126.11                                      | Payee address      City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044      |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 26/87 Report: 145/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>12/31/2010   | <b>5</b> Payee name<br>Blackman/AmCheck Payroll Services                                      |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$180.24                                    | <b>7</b> Payee address City; State; Zip Code<br>10201 South 51st Street<br>Phoenix, AZ 85044  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll service  |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/17/2010  | Payee name<br>Bliss Companies Inc.  |  |   |   |              |
| Amount (\$)<br>\$1,292.86   | Payee address City; State; Zip Code<br>P.O. Box 128<br>Northville, MI 48167                   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Gifts for other Senators Lt. Governor and Secretary of the Senate |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/20/2010  | Payee name<br>Bliss Companies Inc.  |  |   |   |              |
| Amount (\$)<br>\$81.55  | Payee address City; State; Zip Code<br>P.O. Box 128<br>Northville, MI 48167                   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Gifts for other Senators Lt. Governor and Secretary of the Senate |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/15/2010  | Payee name<br>Boswell, Charles R.   |  |   |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                 |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 27/87 Report: 146/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/30/2010   | <b>5</b> Payee name<br>Boswell, Charles R.   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$452.17                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Boswell, Charles R.  |  |  |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Boswell, Charles R.  |  |  |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Boswell, Charles R.  |  |  |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 28/87 Report: 147/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/30/2010   | <b>5</b> Payee name<br>Boswell, Charles R.   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$452.17                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Boswell, Charles R.  |  |  |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Boswell, Charles R.  |  |  |   |              |
| Amount (\$)<br>\$452.17   | Payee address City; State; Zip Code<br>P.O. Box 17632<br>Fort Worth, TX 76102                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>09/15/2010  | Payee name<br>Buda, Dan  |  |  |   |              |
| Amount (\$)<br>\$230.87   | Payee address City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |              |
|--|--|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 29/87 Report: 148/212           |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>09/30/2010                                  | <b>5 Payee name</b><br>Buda, Dan   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$230.88                             | <b>7 Payee address</b> City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                   |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/15/2010                                    | <b>Payee name</b><br>Buda, Dan   |  |  |   |              |
| <b>Amount (\$)</b><br>\$230.87                               | <b>Payee address</b> City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                     |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/29/2010                                    | <b>Payee name</b><br>Buda, Dan   |  |  |   |              |
| <b>Amount (\$)</b><br>\$230.88                               | <b>Payee address</b> City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                     |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/15/2010                                    | <b>Payee name</b><br>Buda, Dan   |  |  |   |              |
| <b>Amount (\$)</b><br>\$230.87                               | <b>Payee address</b> City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                     |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 30/87 Report: 149/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/30/2010   | <b>5</b> Payee name<br>Buda, Dan   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$230.88                                    | <b>7</b> Payee address City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll         |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Buda, Dan  |  |  |   |              |
| Amount (\$)<br>\$230.87   | Payee address City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Buda, Dan  |  |  |   |              |
| Amount (\$)<br>\$230.88   | Payee address City; State; Zip Code<br>1406B Matthews Ln.<br>Austin, TX 78745                            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/03/2010  | Payee name<br>Calloway's   |  |  |   |              |
| Amount (\$)<br>\$32.46  | Payee address City; State; Zip Code<br>2651 S Hulen<br>Fort Worth, TX 76109                              |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense           |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Plants for district office |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |
|---|--|--|---|---|
| <b>1</b> PAGE #<br>Schedule: 31/87 Report: 150/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>09/16/2010   | <b>5</b> Payee name<br>Candlelight Christmas in Ryan Place   |  |   |   |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 11816<br>Fort Worth, TX 76110-0816  |  |   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Advertising in event program |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>10/29/2010  | Payee name<br>Carol Kent Campaign  |  |   |   |
| Amount (\$)<br>\$1,000.00   | Payee address City; State; Zip Code<br>P.O. Box 743713<br>Dallas, TX 75374-3713  |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Contribution                            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>08/10/2010  | Payee name<br>Chet Edwards for Congress  |  |   |   |
| Amount (\$)<br>\$250.00   | Payee address City; State; Zip Code<br>P.O. Box 23273<br>Waco, TX 76702  |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Contribution                            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |
| Date<br>10/12/2010  | Payee name<br>City Kitchen   |  |   |   |
| Amount (\$)<br>\$3,204.70   | Payee address City; State; Zip Code<br>2317 Blue Smoke Ct N<br>Fort Worth, TX 76105  |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political event catering                |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  | Office held:                                |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 32/87 Report: 151/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/07/2010   | <b>5</b> Payee name<br>City of Austin   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$57.04                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utilities - Austin |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/06/2010  | Payee name<br>City of Austin  |  |  |   |              |
| Amount (\$)<br>\$73.39  | Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utilities - Austin            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/24/2010  | Payee name<br>City of Austin  |  |  |   |              |
| Amount (\$)<br>\$61.57  | Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utilities - Austin            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>City of Austin  |  |  |   |              |
| Amount (\$)<br>\$112.56   | Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utilities - Austin            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 33/87 Report: 152/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/27/2010   | <b>5</b> Payee name<br>City of Austin   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$63.07                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utilities - Austin |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/13/2010  | Payee name<br>City of Austin  |  |  |   |              |
| Amount (\$)<br>\$82.10  | Payee address City; State; Zip Code<br>P.O. Box 2267<br>Austin, TX 78783                                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder utility service               |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/07/2010  | Payee name<br>Civic Strategies  |  |  |   |              |
| Amount (\$)<br>\$485.00   | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reply envelopes                            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/15/2010  | Payee name<br>Civic Strategies  |  |  |   |              |
| Amount (\$)<br>\$405.00   | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Printing Expense                          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign promotional materials printing    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 34/87 Report: 153/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/06/2010   | <b>5</b> Payee name<br>Civic Strategies   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$166.75                                    | <b>7</b> Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reply cards |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>Civic Strategies  |  |  |   |              |
| Amount (\$)<br>\$81.50  | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reply cards            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/26/2010  | Payee name<br>Civic Strategies  |  |  |   |              |
| Amount (\$)<br>\$750.00   | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Remittance envelopes   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/26/2010  | Payee name<br>Civic Strategies  |  |  |   |              |
| Amount (\$)<br>\$45.00  | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Printing Expense                            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Design fee             |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 35/87 Report: 154/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/26/2010   | <b>5</b> Payee name<br>Civic Strategies   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$1,200.00                                  | <b>7</b> Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense   |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Stationery           |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Civic Strategies  |  |   |   |              |
| Amount (\$)<br>\$119.00   | Payee address City; State; Zip Code<br>1201 West Park Row Dr<br>Arlington, TX 76013   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Remittance cards                |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/20/2010  | Payee name<br>Colonial Country Club   |  |   |   |              |
| Amount (\$)<br>\$60.00  | Payee address City; State; Zip Code<br>3735 Country Club Circle<br>Fort Worth, TX 76109-1099  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Semper Fidelis Luncheon tickets |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>Common Ground Network   |  |   |   |              |
| Amount (\$)<br>\$75.00  | Payee address City; State; Zip Code<br>P.O. Box 1049<br>Mansfield, TX 76063   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation                        |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |   |   |              |
|--|---|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 36/87 Report: 155/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>07/07/2010                                  | <b>5 Payee name</b><br>Constant Contact   |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$167.79                             | <b>7 Payee address</b> City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451                   |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>E-mail service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>08/10/2010   | Payee name<br>Constant Contact  |  |   |   |              |
| Amount (\$)<br>\$167.79                                      | Payee address      City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451                       |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>E-mail service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/10/2010   | Payee name<br>Constant Contact  |  |   |   |              |
| Amount (\$)<br>\$167.79                                      | Payee address      City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451                       |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Email service             |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/12/2010   | Payee name<br>Constant Contact  |  |   |   |              |
| Amount (\$)<br>\$167.79                                      | Payee address      City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451                       |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Email service             |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 37/87 Report: 156/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/10/2010   | <b>5</b> Payee name<br>Constant Contact   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$167.79                                    | <b>7</b> Payee address City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense                                   |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Email service |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/07/2010  | Payee name<br>Constant Contact  |  |  |   |              |
| Amount (\$)<br>\$167.79   | Payee address City; State; Zip Code<br>1601 Trapelo Rd #329<br>Waltham, MA 02451  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Email service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/04/2010  | Payee name<br>Costco  |  |  |   |              |
| Amount (\$)<br>\$106.50   | Payee address City; State; Zip Code<br>5300 Overton Ridge<br>Fort Worth, TX 76132   |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Parade supplies (candy)  |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/26/2010  | Payee name<br>Craig Watkins Campaign  |  |  |   |              |
| Amount (\$)<br>\$250.00   | Payee address City; State; Zip Code<br>2531 Martin Luther King Jr. Blvd<br>Dallas, TX 75215   |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political contribution   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 38/87 Report: 157/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/07/2010   | <b>5</b> Payee name<br>Crowley Area Chamber of Commerce  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$15.00                                     | <b>7</b> Payee address City; State; Zip Code<br>200 East Main Street<br>Crowley, TX 76036-4211   |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Lunch ticket               |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/15/2010  | Payee name<br>Crowley Area Chamber of Commerce   |  |   |   |              |
| Amount (\$)<br>\$400.00   | Payee address City; State; Zip Code<br>200 East Main Street<br>Crowley, TX 76036-4211  |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Sponsorship                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/06/2010  | Payee name<br>Crowley Area Chamber of Commerce   |  |   |   |              |
| Amount (\$)<br>\$110.00   | Payee address City; State; Zip Code<br>200 East Main Street<br>Crowley, TX 76036-4211  |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues                       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/15/2010  | Payee name<br>Davis, Wendy   |  |   |   |              |
| Amount (\$)<br>\$215.42   | Payee address City; State; Zip Code<br>P.O. Box 1039<br>Fort Worth, TX 76101   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reimbursement for Schedule G expenses |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 39/87 Report: 158/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>12/17/2010   | <b>5</b> Payee name<br>Davis, Wendy   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$1,772.22                                  | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 1039<br>Fort Worth, TX 76101                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reimbursement for Schedule G expenses |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/29/2010  | Payee name<br>Davis, Wendy  |  |  |   |              |
| Amount (\$)<br>\$184.87   | Payee address City; State; Zip Code<br>P.O. Box 1039<br>Fort Worth, TX 76101                            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reimbursement for Schedule G expenses            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Davis, Wendy  |  |  |   |              |
| Amount (\$)<br>\$77.97  | Payee address City; State; Zip Code<br>2737 Calder Court<br>Fort Worth, TX 76107                        |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Loan Repayment/Reimbursement            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reimbursement for Schedule G expenses            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/20/2010  | Payee name<br>Deluxe for Business   |  |  |   |              |
| Amount (\$)<br>\$196.86   | Payee address City; State; Zip Code<br>P.O. Box 1186<br>Lancaster, CA 93584                             |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking                      |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Checks   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 40/87 Report: 159/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/30/2010   | <b>5</b> Payee name<br>Domangue, Bradley   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$820.43                                    | <b>7</b> Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731           |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Domangue, Bradley  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Domangue, Bradley  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Domangue, Bradley  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731                    |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 41/87 Report: 160/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/30/2010   | <b>5</b> Payee name<br>Domangue, Bradley   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$433.68                                    | <b>7</b> Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731           |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll          |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Domangue, Bradley  |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731                    |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Domangue, Bradley  |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>4330 Bull Creek Rd. # 2127<br>Austin, TX 78731                    |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/14/2010  | Payee name<br>ECI Catering & Events  |  |   |   |              |
| Amount (\$)<br>\$76.00  | Payee address City; State; Zip Code<br>1307 Afton St<br>Houston, TX 77055                                |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder event catering |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 42/87 Report: 161/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/15/2010   | <b>5</b> Payee name<br>Ethel Ransom Cultural Club  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address City; State; Zip Code<br>2119 Harrison Ave<br>Fort Worth, TX 76111  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Forest Hill Area Chamber of Commerce   |  |   |   |              |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>3219 California Parkway<br>Forest Hill, TX 76119  |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>Go Daddy   |  |   |   |              |
| Amount (\$)<br>\$102.24   | Payee address City; State; Zip Code<br>14455 N Hayden Rd Ste 219<br>Scottsdale, AZ 85260   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Web hosting         |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Greater Arlington Hispanic Chamber   |  |   |   |              |
| Amount (\$)<br>\$200.00   | Payee address City; State; Zip Code<br>202 E Border St Ste 146<br>Arlington, TX 76010  |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 43/87 Report: 162/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/06/2010   | <b>5</b> Payee name<br>Greater Arlington Mansfield Democratic Women   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$50.00                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 122259<br>Arlington, TX 76012  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense                                      |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political contribution |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>Greater Keller Chamber of Commerce  |  |   |   |              |
| Amount (\$)<br>\$150.00   | Payee address City; State; Zip Code<br>420 Johnson Rd Ste 301<br>Keller, TX 76248   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues                   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/15/2010  | Payee name<br>Grogg, Sonya  |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>Grogg, Sonya  |  |   |   |              |
| Amount (\$)<br>\$82.06  | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Travel Out of District  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Mileage Austin/Fort Worth         |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 44/87 Report: 163/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/30/2010   | <b>5</b> Payee name<br>Grogg, Sonya  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$433.68                                    | <b>7</b> Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237        |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll        |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Grogg, Sonya   |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Grogg, Sonya   |  |   |   |              |
| Amount (\$)<br>\$192.41   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District                   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Mileage Austin/Fort Worth |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Grogg, Sonya   |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 45/87 Report: 164/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/15/2010   | <b>5</b> Payee name<br>Grogg, Sonya  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$433.68                                    | <b>7</b> Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237        |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/30/2010  | Payee name<br>Grogg, Sonya   |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Grogg, Sonya   |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Grogg, Sonya   |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>1211 W 8th St<br>Apt 101<br>Austin, TX 78703-5237                 |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |              |
|--|--|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 46/87 Report: 165/212           |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>07/15/2010                                  | <b>5 Payee name</b><br>HEB Chamber of Commerce   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$204.50                             | <b>7 Payee address</b> City; State; Zip Code<br>2109 Martin Drive<br>Bedford, TX 76021-5910  |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues       |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>07/20/2010                                    | <b>Payee name</b><br>HEB Chamber of Commerce   |  |  |   |              |
| <b>Amount (\$)</b><br>\$150.00                               | <b>Payee address</b> City; State; Zip Code<br>2109 Martin Drive<br>Bedford, TX 76021-5910  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets                    |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/01/2010                                    | <b>Payee name</b><br>HEB Chamber of Commerce   |  |  |   |              |
| <b>Amount (\$)</b><br>\$20.00                                | <b>Payee address</b> City; State; Zip Code<br>2109 Martin Drive<br>Bedford, TX 76021-5910  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership fee                   |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| <b>Date</b><br>07/20/2010                                    | <b>Payee name</b><br>Hedgepeth, Jane   |  |  |   |              |
| <b>Amount (\$)</b><br>\$500.00                               | <b>Payee address</b> City; State; Zip Code<br>1339 Bonham Terrace<br>Austin, TX 78704  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Consulting Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reporting and compliance service |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 47/87 Report: 166/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/16/2010   | <b>5</b> Payee name<br>Hedgepeth, Jane   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$500.00                                    | <b>7</b> Payee address City; State; Zip Code<br>1339 Bonham Terrace<br>Austin, TX 78704        |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense  |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reporting and compliance service |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Hedgepeth, Jane  |  |   |   |              |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>1339 Bonham Terrace<br>Austin, TX 78704                 |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Consulting Expense             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Reporting and compliance service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/07/2010  | Payee name<br>Henson McAlister   |  |   |   |              |
| Amount (\$)<br>\$485.80   | Payee address City; State; Zip Code<br>P.O. Box 470931<br>Fort Worth, TX 76147                 |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>District office framing                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>11/11/2010  | Payee name<br>Home Depot   |  |   |   |              |
| Amount (\$)<br>\$145.56   | Payee address City; State; Zip Code<br>4850 SW Loop 820<br>Fort Worth, TX 76109                |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign office supplies                    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 48/87 Report: 167/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/15/2010   | <b>5</b> Payee name<br>Internal Revenue Service  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$323.35                                    | <b>7</b> Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>07/29/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$323.35   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/15/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$323.35   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/26/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$323.35   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 49/87 Report: 168/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/15/2010   | <b>5</b> Payee name<br>Internal Revenue Service  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$940.78                                    | <b>7</b> Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>09/30/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,151.21   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,016.16   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,016.12   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 50/87 Report: 169/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/15/2010   | <b>5</b> Payee name<br>Internal Revenue Service  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$1,004.14                                  | <b>7</b> Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/30/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,004.14   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,004.16   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Internal Revenue Service   |  |  |   |              |
| Amount (\$)<br>\$1,004.12   | Payee address City; State; Zip Code<br>US Department of the Treasury<br>Ogden, UT 84203                  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll taxes            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 51/87 Report: 170/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/06/2010   | <b>5</b> Payee name<br>Intuit / Quickbooks  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$42.22                                     | <b>7</b> Payee address City; State; Zip Code<br>2632 Marine Way<br>Mountain View, CA 94043-1126 |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Accounting software fee |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/06/2010  | Payee name<br>Intuit / Quickbooks   |  |  |   |              |
| Amount (\$)<br>\$42.22  | Payee address City; State; Zip Code<br>2632 Marine Way<br>Mountain View, CA 94043-1126          |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking              |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Accounting software fee            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/07/2010  | Payee name<br>Intuit / Quickbooks   |  |  |   |              |
| Amount (\$)<br>\$42.22  | Payee address City; State; Zip Code<br>2632 Marine Way<br>Mountain View, CA 94043-1126          |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking              |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Accounting software fee            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/06/2010  | Payee name<br>Intuit / Quickbooks   |  |  |   |              |
| Amount (\$)<br>\$42.22  | Payee address City; State; Zip Code<br>2632 Marine Way<br>Mountain View, CA 94043-1126          |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking              |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Accounting software fee            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 52/87 Report: 171/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/29/2010   | <b>5</b> Payee name<br>Jill Johnson Photography   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$150.00                                    | <b>7</b> Payee address City; State; Zip Code<br>3783 W. 6th St.<br>Fort Worth, TX 76107   |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense  |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Photography service              |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/17/2010  | Payee name<br>Lamberts Downtown BBQ   |  |   |   |              |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>401 West 2nd Street<br>Austin, TX 78701  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political event deposit                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>League of Women Voters of Tarrant County  |  |   |   |              |
| Amount (\$)<br>\$300.00   | Payee address City; State; Zip Code<br>3212 Collinsworth St<br>Fort Worth, TX 76107   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership donation                         |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/02/2010  | Payee name<br>Merchant Account Services   |  |   |   |              |
| Amount (\$)<br>\$19.95  | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 53/87 Report: 172/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/02/2010   | <b>5</b> Payee name<br>Merchant Account Services  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$197.40                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/06/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$1.40   | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>07/06/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$0.11   | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/04/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$110.00   | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 54/87 Report: 173/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/04/2010   | <b>5</b> Payee name<br>Merchant Account Services  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$24.50                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/04/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$289.68   | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/02/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$65.32  | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/02/2010  | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$19.95  | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 55/87 Report: 174/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>09/03/2010                                  | <b>5 Payee name</b><br>Merchant Account Services  |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$106.86                             | <b>7 Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336   |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>09/03/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$3.85  | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/04/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$335.75                                      | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/04/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$19.95                                       | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 56/87 Report: 175/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>10/05/2010                                  | <b>5 Payee name</b><br>Merchant Account Services  |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$35.39                              | <b>7 Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336   |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Accounting/Banking |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/05/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$12.60                                       | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/03/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$154.79                                      | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/03/2010   | Payee name<br>Merchant Account Services   |  |  |   |              |
| Amount (\$)<br>\$393.34                                      | Payee address City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 57/87 Report: 176/212 |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00062095 |  |
| <b>4 Date</b><br>11/03/2010                        | <b>5 Payee name</b><br>Merchant Account Services   |  |  |   |  |
| <b>6 Amount (\$)</b><br>\$70.60                    | <b>7 Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336  |  |  |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                    | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Accounting/Banking  |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts |   |  |
|  | <div style="display: flex; justify-content: space-between;"> <div><b>9 Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div> |  |  |   |  |
| <b>Date</b><br>12/02/2010                          | <b>Payee name</b><br>Merchant Account Services   |  |  |   |  |
| <b>Amount (\$)</b><br>\$102.24                     | <b>Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |  |
|  | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |
| <b>Date</b><br>12/03/2010                          | <b>Payee name</b><br>Merchant Account Services   |  |  |   |  |
| <b>Amount (\$)</b><br>\$23.80                      | <b>Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |  |
|  | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |
| <b>Date</b><br>12/03/2010                          | <b>Payee name</b><br>Merchant Account Services   |  |  |   |  |
| <b>Amount (\$)</b><br>\$232.10                     | <b>Payee address</b> City; State; Zip Code<br>P.O. Box 36001<br>Fort Lauderdale, FL 33336  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Merchant account service fees and discounts            |   |  |
|  | <div style="display: flex; justify-content: space-between;"> <div><b>Complete ONLY if direct expenditure to benefit C/OH</b></div> <div>Candidate / Officeholder name</div> <div>Office sought:</div> <div>Office held:</div> </div>   |  |  |   |  |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 58/87 Report: 177/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/20/2010   | <b>5</b> Payee name<br>NAACP   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address City; State; Zip Code<br>1107 E. 11th St Ste A<br>Austin, TX 78702  |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Tickets to event  |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>09/20/2010  | Payee name<br>NAACP  |  |  |   |              |
| Amount (\$)<br>\$200.00   | Payee address City; State; Zip Code<br>1107 E. 11th St Ste A<br>Austin, TX 78702   |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Advertising in event program |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>NAACP Fort Worth/Tarrant Branch  |  |  |   |              |
| Amount (\$)<br>\$170.00   | Payee address City; State; Zip Code<br>1063 Evans Ave<br>Fort Worth, TX 76104  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Tickets to event             |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>NAACP Fort Worth/Tarrant Branch  |  |  |   |              |
| Amount (\$)<br>\$55.00  | Payee address City; State; Zip Code<br>1063 Evans Ave<br>Fort Worth, TX 76104  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 59/87 Report: 178/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/01/2010   | <b>5</b> Payee name<br>NAACP Fort Worth/Tarrant Branch   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$75.00                                     | <b>7</b> Payee address City; State; Zip Code<br>1063 Evans Ave<br>Fort Worth, TX 76104   |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Advertising in event program |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>NGP Software Inc   |  |   |   |              |
| Amount (\$)<br>\$1,050.00   | Payee address City; State; Zip Code<br>1225 Eye St NW Suite 1225<br>Washington, DC 20005   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Database software                       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/16/2010  | Payee name<br>NGP Software Inc   |  |   |   |              |
| Amount (\$)<br>\$1,050.00   | Payee address City; State; Zip Code<br>1225 Eye St NW Suite 1225<br>Washington, DC 20005   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Database software                       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/08/2010  | Payee name<br>NGP Software Inc   |  |   |   |              |
| Amount (\$)<br>\$1,050.00   | Payee address City; State; Zip Code<br>1225 Eye St NW Suite 1225<br>Washington, DC 20005   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Database software                       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 60/87 Report: 179/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/17/2010   | <b>5</b> Payee name<br>Office Depot   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$35.67                                     | <b>7</b> Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                       |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office Supplies          |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>09/17/2010  | Payee name<br>Office Depot  |  |   |   |              |
| Amount (\$)<br>\$80.06  | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event supplies: Nametags paper pens |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/01/2010  | Payee name<br>Office Depot  |  |   |   |              |
| Amount (\$)<br>\$136.34   | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event supplies: Nametags paper pens |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/04/2010  | Payee name<br>Office Depot  |  |   |   |              |
| Amount (\$)<br>\$35.70  | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |
|---|---|--|---|---|
| <b>1</b> PAGE #<br>Schedule: 61/87 Report: 180/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>10/04/2010   | <b>5</b> Payee name<br>Office Depot   |  |   |   |
| <b>6</b> Amount (\$)<br>\$3.78                                      | <b>7</b> Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                       |  |   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies          |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>10/15/2010  | Payee name<br>Office Depot  |  |   |   |
| Amount (\$)<br>\$75.54  | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event supplies: Nametags paper pens |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>10/29/2010  | Payee name<br>Office Depot  |  |   |   |
| Amount (\$)<br>\$5.94   | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event supplies: Nametags paper pens |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>11/22/2010  | Payee name<br>Office Depot  |  |   |   |
| Amount (\$)<br>\$16.75  | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |   |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies                     |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 62/87 Report: 181/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>12/01/2010   | <b>5</b> Payee name<br>Office Depot  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$70.35                                     | <b>7</b> Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107            |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Name tags                 |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>07/07/2010  | Payee name<br>Ozarka   |  |  |   |              |
| Amount (\$)<br>\$31.58  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/06/2010  | Payee name<br>Ozarka   |  |  |   |              |
| Amount (\$)<br>\$33.83  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/19/2010  | Payee name<br>Ozarka   |  |  |   |              |
| Amount (\$)<br>\$55.11  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680            |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 63/87 Report: 182/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/21/2010   | <b>5</b> Payee name<br>Ozarka  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$40.37                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680     |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/20/2010  | Payee name<br>Ozarka   |  |   |   |              |
| Amount (\$)<br>\$35.64  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>11/19/2010  | Payee name<br>Ozarka   |  |   |   |              |
| Amount (\$)<br>\$43.15  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/21/2010  | Payee name<br>Ozarka   |  |   |   |              |
| Amount (\$)<br>\$16.65  | Payee address City; State; Zip Code<br>P.O. Box 856680<br>Louisville, KY 40285-6680              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Water - Capitol and district offices            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 64/87 Report: 183/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/06/2010   | <b>5</b> Payee name<br>Paula Pierson Campaign  |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 172<br>Arlington, TX 76004  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political contribution   |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/10/2010  | Payee name<br>Planned Parenthood of North Texas Inc.   |  |   |   |              |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>301 S. Henderson St<br>Fort Worth, TX 76104   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event sponsorship donation          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/30/2010  | Payee name<br>Planned Parenthood of North Texas Inc.   |  |   |   |              |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>301 S. Henderson St<br>Fort Worth, TX 76104   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation in honor of event sponsors |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>Public Storage   |  |   |   |              |
| Amount (\$)<br>\$183.00   | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental        |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 65/87 Report: 184/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>07/20/2010   | <b>5</b> Payee name<br>Public Storage   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$35.00                                     | <b>7</b> Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520            |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>08/05/2010  | Payee name<br>Public Storage  |  |   |   |              |
| Amount (\$)<br>\$183.00   | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520                     |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>08/24/2010  | Payee name<br>Public Storage  |  |   |   |              |
| Amount (\$)<br>\$183.00   | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520                     |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/05/2010  | Payee name<br>Public Storage  |  |   |   |              |
| Amount (\$)<br>\$183.00   | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520                     |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 66/87 Report: 185/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/05/2010   | <b>5</b> Payee name<br>Public Storage   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$183.00                                    | <b>7</b> Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520            |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>11/11/2010  | Payee name<br>Public Storage  |  |   |   |              |
| Amount (\$)<br>\$28.20  | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520                     |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Boxes for storage                       |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/06/2010  | Payee name<br>Public Storage  |  |   |   |              |
| Amount (\$)<br>\$183.00   | Payee address City; State; Zip Code<br>1015 Henderson St<br>Fort Worth, TX 76102-4520                     |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign storage unit rental            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/01/2010  | Payee name<br>Safe Haven  |  |   |   |              |
| Amount (\$)<br>\$200.00   | Payee address City; State; Zip Code<br>6815 Manhattan Blvd Ste 105<br>Fort Worth, TX 76120                |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 67/87 Report: 186/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/16/2010   | <b>5</b> Payee name<br>Senate Hispanic Caucus  |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$1,000.00                                  | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 684754<br>Austin, TX 78768  |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/08/2010  | Payee name<br>Senate Ladies Club   |  |  |   |              |
| Amount (\$)<br>\$900.00   | Payee address City; State; Zip Code<br>P.O. Box 12068<br>Austin, TX 78711  |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets              |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/08/2010  | Payee name<br>Senate Ladies Club   |  |  |   |              |
| Amount (\$)<br>\$50.00  | Payee address City; State; Zip Code<br>P.O. Box 12068<br>Austin, TX 78711  |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/25/2010  | Payee name<br>Senior Citizens Services   |  |  |   |              |
| Amount (\$)<br>\$125.00   | Payee address City; State; Zip Code<br>1400 Circle Drive Suite 300<br>Fort Worth, TX 76119   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets              |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |   |   |              |
|--|--|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 68/87 Report: 187/212           |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>07/07/2010                                  | <b>5 Payee name</b><br>Southwest Voter Registration Project  |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$250.00                             | <b>7 Payee address</b> City; State; Zip Code<br>206 Lombard Dr 2nd Floor<br>San Antonio, TX 78226  |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event sponsorship donation |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>07/28/2010   | Payee name<br>Sprint   |  |   |   |              |
| Amount (\$)<br>\$74.69                                       | Payee address      City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service                      |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/28/2010   | Payee name<br>Sprint   |  |   |   |              |
| Amount (\$)<br>\$74.69                                       | Payee address      City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service                      |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/28/2010   | Payee name<br>Sprint   |  |   |   |              |
| Amount (\$)<br>\$74.69                                       | Payee address      City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service                      |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|--|---|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 69/87 Report: 188/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>10/28/2010                                  | <b>5 Payee name</b><br>Sprint   |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$74.69                              | <b>7 Payee address</b> City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251            |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>11/28/2010                                    | <b>Payee name</b><br>Sprint   |  |   |   |              |
| <b>Amount (\$)</b><br>\$74.69                                | <b>Payee address</b> City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>12/28/2010                                    | <b>Payee name</b><br>Sprint   |  |   |   |              |
| <b>Amount (\$)</b><br>\$74.69                                | <b>Payee address</b> City; State; Zip Code<br>6391 Spring Parkway<br>Overland Park, KS 66251              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Internet service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| <b>Date</b><br>09/15/2010                                    | <b>Payee name</b><br>Stadler, Graham  |  |   |   |              |
| <b>Amount (\$)</b><br>\$433.68                               | <b>Payee address</b> City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                     |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor             |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                     |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 70/87 Report: 189/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/30/2010   | <b>5</b> Payee name<br>Stadler, Graham   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$433.68                                    | <b>7</b> Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                  |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Stadler, Graham  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Stadler, Graham  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>11/15/2010  | Payee name<br>Stadler, Graham  |  |  |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 71/87 Report: 190/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/30/2010   | <b>5</b> Payee name<br>Stadler, Graham   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$433.68                                    | <b>7</b> Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll      |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/15/2010  | Payee name<br>Stadler, Graham  |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                           |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                 |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>12/31/2010  | Payee name<br>Stadler, Graham  |  |   |   |              |
| Amount (\$)<br>\$433.68   | Payee address City; State; Zip Code<br>2610 Greene Ave<br>Fort Worth, TX 76109                           |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll                 |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/17/2010  | Payee name<br>Star-Telegram  |  |   |   |              |
| Amount (\$)<br>\$454.80   | Payee address City; State; Zip Code<br>400 W 7th St<br>Fort Worth, TX 76102                              |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense           |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Subscription for office |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 72/87 Report: 191/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>08/16/2010   | <b>5</b> Payee name<br>Starbucks   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$32.69                                     | <b>7</b> Payee address City; State; Zip Code<br>7th & Carroll St<br>Fort Worth, TX 76107         |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Staff meal        |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>12/02/2010  | Payee name<br>Starbucks - Austin   |  |  |   |              |
| Amount (\$)<br>\$10.26  | Payee address City; State; Zip Code<br>5th & Lamar<br>Austin, TX 78703                           |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Staff travel food & beverage |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>08/14/2010  | Payee name<br>Target   |  |  |   |              |
| Amount (\$)<br>\$45.97  | Payee address City; State; Zip Code<br>301 Carroll<br>Fort Worth, TX 76107                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies              |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/04/2010  | Payee name<br>Target   |  |  |   |              |
| Amount (\$)<br>\$47.52  | Payee address City; State; Zip Code<br>301 Carroll<br>Fort Worth, TX 76107                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies              |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |
|---|---|--|---|---|
| <b>1</b> PAGE #<br>Schedule: 73/87 Report: 192/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>11/15/2010   | <b>5</b> Payee name<br>Target   |  |   |   |
| <b>6</b> Amount (\$)<br>\$40.95                                     | <b>7</b> Payee address City; State; Zip Code<br>301 Carroll<br>Fort Worth, TX 76107   |  |   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                                     |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies        |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>12/29/2010  | Payee name<br>Tarrant County Tax Assessor/Collector   |  |   |   |
| Amount (\$)<br>\$62.80  | Payee address City; State; Zip Code<br>100 East Weatherford Street Fort Worth Texas<br>Fort Worth, TX 76196                                   |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense                                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder vehicle registration |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>09/17/2010  | Payee name<br>Tarrant County Trial Lawyers Association  |  |   |   |
| Amount (\$)<br>\$40.00  | Payee address City; State; Zip Code<br>3102 Oak Lawn Ave Ste 1100<br>Dallas, TX 75219   |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets                     |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |
| Date<br>11/15/2010  | Payee name<br>Tarrant County Veterans Council   |  |   |   |
| Amount (\$)<br>\$24.00  | Payee address City; State; Zip Code<br>P.O. Box 27391<br>Fort Worth, TX 76127   |  |   |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Membership dues                   |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  | Office held:                                |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 74/87 Report: 193/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/12/2010   | <b>5</b> Payee name<br>Taylor's Rental Equipment Company   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$133.48                                    | <b>7</b> Payee address City; State; Zip Code<br>PO Box 470764<br>Fort Worth, TX 76147-0764           |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense             |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event equipment rental   |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>09/13/2010  | Payee name<br>Texas Early Childhood Education Coalition  |  |   |   |              |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>316 W. 12th Street Suite 105 Austin Texas<br>Austin, TX 78701 |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation in honor of event sponsors |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Texas State Senate   |  |   |   |              |
| Amount (\$)<br>\$300.00   | Payee address City; State; Zip Code<br>P.O. Box 12068<br>Austin, TX 78711                            |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense       |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Inadvertent use deposit (advance)   |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>10/06/2010  | Payee name<br>Texas State Senate--Purchasing   |  |   |   |              |
| Amount (\$)<br>\$202.50   | Payee address City; State; Zip Code<br>P.O. Box 12068<br>Austin, TX 78711                            |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Flags for constituents              |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |   |   |              |
|---|---|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 75/87 Report: 194/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>11/22/2010   | <b>5</b> Payee name<br>Texas State Senate--Purchasing   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$22.50                                     | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 12068<br>Austin, TX 78711  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense                                      |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Flags for constituents |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>07/20/2010  | Payee name<br>Texas State Troopers Association  |  |   |   |              |
| Amount (\$)<br>\$20.00  | Payee address City; State; Zip Code<br>5805 N. Lamar<br>Austin, TX 78752  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event tickets                     |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/06/2010  | Payee name<br>The Flower Studio   |  |   |   |              |
| Amount (\$)<br>\$121.78   | Payee address City; State; Zip Code<br>1406 West 6th St<br>Austin, TX 78703   |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Gift for hosts                    |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/06/2010  | Payee name<br>The Star Group  |  |   |   |              |
| Amount (\$)<br>\$23.99  | Payee address City; State; Zip Code<br>319 Burleson Blvd<br>Burleson, TX 76028  |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Subscription for office           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 76/87 Report: 195/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/06/2010   | <b>5</b> Payee name<br>The Star Group   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$34.99                                     | <b>7</b> Payee address City; State; Zip Code<br>319 Burleson Blvd<br>Burleson, TX 76028                   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Subscription for office |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>The UPS Store   |  |  |   |              |
| Amount (\$)<br>\$38.81  | Payee address City; State; Zip Code<br>209 2nd St<br>Fort Worth, TX 76102                                 |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Shipping                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/27/2010  | Payee name<br>The UPS Store   |  |  |   |              |
| Amount (\$)<br>\$7.67   | Payee address City; State; Zip Code<br>209 2nd St<br>Fort Worth, TX 76102                                 |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Shipping                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>The UPS Store   |  |  |   |              |
| Amount (\$)<br>\$9.20   | Payee address City; State; Zip Code<br>209 2nd St<br>Fort Worth, TX 76102                                 |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense          |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Shipping                           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |   |   |              |
|--|--|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 77/87 Report: 196/212           |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>07/20/2010                                  | <b>5 Payee name</b><br>Tillman's Roadhouse   |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$25.57                              | <b>7 Payee address</b> City; State; Zip Code<br>2933 Crockett St<br>Fort Worth, TX 76107         |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| <b>Date</b><br>07/22/2010                                    | <b>Payee name</b><br>Tillman's Roadhouse   |  |   |   |              |
| <b>Amount (\$)</b><br>\$261.66                               | <b>Payee address</b> City; State; Zip Code<br>2933 Crockett St<br>Fort Worth, TX 76107           |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| <b>Date</b><br>07/14/2010                                    | <b>Payee name</b><br>Time Warner Cable   |  |   |   |              |
| <b>Amount (\$)</b><br>\$229.15                               | <b>Payee address</b> City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097           |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder cable service        |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| <b>Date</b><br>08/12/2010                                    | <b>Payee name</b><br>Time Warner Cable   |  |   |   |              |
| <b>Amount (\$)</b><br>\$229.15                               | <b>Payee address</b> City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097           |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder cable service        |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|  |   |  |   |   |              |
|--|---|--|---|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 78/87 Report: 197/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |   | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>09/13/2010                                  | <b>5 Payee name</b><br>Time Warner Cable  |  |   |   |              |
| <b>6 Amount (\$)</b><br>\$229.15                             | <b>7 Payee address</b> City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097                  |  |   |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder cable service |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>10/12/2010   | Payee name<br>Time Warner Cable   |  |   |   |              |
| Amount (\$)<br>\$229.15                                      | Payee address      City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097                      |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder cable service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>11/12/2010   | Payee name<br>Time Warner Cable   |  |   |   |              |
| Amount (\$)<br>\$229.13                                      | Payee address      City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097                      |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder cable service            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |
| Date<br>12/13/2010   | Payee name<br>Time Warner Cable   |  |   |   |              |
| Amount (\$)<br>\$229.13                                      | Payee address      City; State; Zip Code<br>P.O. Box 660097<br>Dallas, TX 75266-0097                      |  |   |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder Austin cable service     |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 79/87 Report: 198/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>07/15/2010                                  | <b>5 Payee name</b><br>Times Ten Cellars  |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$400.00                             | <b>7 Payee address</b> City; State; Zip Code<br>1100 Foch St<br>Fort Worth, TX 76107  |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Event Expense  |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Facility rental for political event |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/12/2010                                    | <b>Payee name</b><br>Times Ten Cellars  |  |  |   |              |
| <b>Amount (\$)</b><br>\$1,445.04                             | <b>Payee address</b> City; State; Zip Code<br>1100 Foch St<br>Fort Worth, TX 76107  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Political event catering                       |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>10/12/2010                                    | <b>Payee name</b><br>Times Ten Cellars  |  |  |   |              |
| <b>Amount (\$)</b><br>\$400.00                               | <b>Payee address</b> City; State; Zip Code<br>1100 Foch St<br>Fort Worth, TX 76107  |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Event Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Facility rental for political event            |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/15/2010                                    | <b>Payee name</b><br>United Community Centers   |  |  |   |              |
| <b>Amount (\$)</b><br>\$200.00                               | <b>Payee address</b> City; State; Zip Code<br>1200 E Maddox<br>Fort Worth, TX 76104   |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation                                       |   |              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |   |   |              |
|---|--|--|---|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 80/87 Report: 199/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |   | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/15/2010   | <b>5</b> Payee name<br>United Hispanic Council of Tarrant County   |  |   |   |              |
| <b>6</b> Amount (\$)<br>\$400.00                                    | <b>7</b> Payee address City; State; Zip Code<br>P.O. Box 6241<br>Fort Worth, TX 76115  |  |   |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/06/2010  | Payee name<br>United States Postal Service   |  |   |   |              |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Box rental          |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/24/2010  | Payee name<br>United States Postal Service   |  |   |   |              |
| Amount (\$)<br>\$220.00   | Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage             |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |
| Date<br>08/24/2010  | Payee name<br>United States Postal Service   |  |   |   |              |
| Amount (\$)<br>\$352.00   | Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102   |  |   |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage             |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:  |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 81/87 Report: 200/212 |  | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00062095 |  |
| <b>4 Date</b><br>09/17/2010                        | <b>5 Payee name</b><br>United States Postal Service  |  |  |   |  |
| <b>6 Amount (\$)</b><br>\$308.00                   | <b>7 Payee address</b> City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                    | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense                                  |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage |   |  |
|  | <b>9 Complete ONLY if direct expenditure to benefit C/OH</b><br>Candidate / Officeholder name: _____ Office sought: _____ Office held: _____ |  |  |   |  |
| <b>Date</b><br>10/01/2010                          | <b>Payee name</b><br>United States Postal Service  |  |  |   |  |
| <b>Amount (\$)</b><br>\$660.00                     | <b>Payee address</b> City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name: _____ Office sought: _____ Office held: _____          |  |  |   |  |
| <b>Date</b><br>10/04/2010                          | <b>Payee name</b><br>United States Postal Service  |  |  |   |  |
| <b>Amount (\$)</b><br>\$15.90                      | <b>Payee address</b> City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name: _____ Office sought: _____ Office held: _____          |  |  |   |  |
| <b>Date</b><br>10/15/2010                          | <b>Payee name</b><br>United States Postal Service  |  |  |   |  |
| <b>Amount (\$)</b><br>\$220.00                     | <b>Payee address</b> City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                      | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense   |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage            |   |  |
|  | Complete ONLY if direct expenditure to benefit C/OH<br>Candidate / Officeholder name: _____ Office sought: _____ Office held: _____          |  |  |   |  |



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
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Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 82/87 Report: 201/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>10/15/2010   | <b>5</b> Payee name<br>United States Postal Service   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$132.00                                    | <b>7</b> Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102   |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense                                   |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/22/2010  | Payee name<br>United States Postal Service  |  |  |   |              |
| Amount (\$)<br>\$264.00   | Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/21/2010  | Payee name<br>United States Postal Service  |  |  |   |              |
| Amount (\$)<br>\$44.00  | Payee address City; State; Zip Code<br>251 W Lancaster<br>Fort Worth, TX 76102  |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Postage            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>08/04/2010  | Payee name<br>University of Texas at Arlington  |  |  |   |              |
| Amount (\$)<br>\$250.00   | Payee address City; State; Zip Code<br>Box 19198<br>Arlington, TX 76019   |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Donation           |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|  |   |  |  |   |              |
|--|---|--|--|---|--------------|
| <b>1 PAGE #</b><br>Schedule: 83/87 Report: 202/212           |   | <b>2 FILER NAME</b><br>Davis, Wendy R. |  | <b>3 ACCOUNT # (TEC filers)</b><br>00062095 |              |
| <b>4 Date</b><br>11/15/2010                                  | <b>5 Payee name</b><br>USAA   |  |  |   |              |
| <b>6 Amount (\$)</b><br>\$1,303.92                           | <b>7 Payee address</b> City; State; Zip Code<br>9800 Fredericksburg Road<br>San Antonio, TX 78288                     |  |  |   |              |
| <b>8 PURPOSE OF EXPENDITURE</b>                              | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder vehicle insurance policy |   |              |
| <b>9 Complete ONLY if direct expenditure to benefit C/OH</b> | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>11/15/2010                                    | <b>Payee name</b><br>USAA   |  |  |   |              |
| <b>Amount (\$)</b><br>\$182.09                               | <b>Payee address</b> City; State; Zip Code<br>9800 Fredericksburg Road<br>San Antonio, TX 78288                       |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder rental insurance policy             |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>07/27/2010                                    | <b>Payee name</b><br>Vonage   |  |  |   |              |
| <b>Amount (\$)</b><br>\$64.18                                | <b>Payee address</b> City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                                |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                                |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| <b>Date</b><br>08/27/2010                                    | <b>Payee name</b><br>Vonage   |  |  |   |              |
| <b>Amount (\$)</b><br>\$64.18                                | <b>Payee address</b> City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                                |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                        |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service                                |   |              |
| <b>Complete ONLY if direct expenditure to benefit C/OH</b>   | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |              |
|---|---|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 84/87 Report: 203/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/28/2010   | <b>5</b> Payee name<br>Vonage   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$64.18                                     | <b>7</b> Payee address City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                  |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>10/27/2010  | Payee name<br>Vonage  |  |  |   |              |
| Amount (\$)<br>\$61.56  | Payee address City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                           |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>11/29/2010  | Payee name<br>Vonage  |  |  |   |              |
| Amount (\$)<br>\$61.56  | Payee address City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                           |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |
| Date<br>12/28/2010  | Payee name<br>Vonage  |  |  |   |              |
| Amount (\$)<br>\$61.56  | Payee address City; State; Zip Code<br>395 Mission St<br>Carol Stream, IL 60188                           |  |  |   |              |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Telephone service            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |              |
|---|--|--|--|---|--------------|
| <b>1</b> PAGE #<br>Schedule: 85/87 Report: 204/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |              |
| <b>4</b> Date<br>09/15/2010   | <b>5</b> Payee name<br>Wendell, Ware   |  |  |   |              |
| <b>6</b> Amount (\$)<br>\$604.92                                    | <b>7</b> Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                |  |  |   |              |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |              |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>09/30/2010  | Payee name<br>Wendell, Ware  |  |  |   |              |
| Amount (\$)<br>\$708.01   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/15/2010  | Payee name<br>Wendell, Ware  |  |  |   |              |
| Amount (\$)<br>\$656.47   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |
| Date<br>10/29/2010  | Payee name<br>Wendell, Ware  |  |  |   |              |
| Amount (\$)<br>\$656.48   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |              |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   |   | Office held: |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |  |  |  |   |
|---|--|--|--|---|
| <b>1</b> PAGE #<br>Schedule: 86/87 Report: 205/212                  |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>11/15/2010   | <b>5</b> Payee name<br>Wendell, Ware   |  |  |   |
| <b>6</b> Amount (\$)<br>\$656.48                                    | <b>7</b> Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                |  |  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>11/30/2010  | Payee name<br>Wendell, Ware  |  |  |   |
| Amount (\$)<br>\$656.47   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>12/15/2010  | Payee name<br>Wendell, Ware  |  |  |   |
| Amount (\$)<br>\$656.47   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |
| Date<br>12/31/2010  | Payee name<br>Wendell, Ware  |  |  |   |
| Amount (\$)<br>\$656.48   | Payee address City; State; Zip Code<br>5704 Lomita Verde Cir<br>Austin, TX 78749                         |  |  |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Payroll            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |  | Office sought:   | Office held:                                |

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

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

|   |   |  |  |   |
|---|---|--|--|---|
| <b>1</b> PAGE #<br>Schedule: 87/87 Report: 206/212                  |   | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>08/24/2010   | <b>5</b> Payee name<br>Xpedx  |  |  |   |
| <b>6</b> Amount (\$)<br>\$54.10                                     | <b>7</b> Payee address City; State; Zip Code<br>2816 Shamrock<br>Fort Worth, TX 76107                       |  |  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Paper |   |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   |  | Office sought:   | Office held:                                |
| Date<br>09/17/2010  | Payee name<br>Xpedx   |  |  |   |
| Amount (\$)<br>\$54.10  | Payee address City; State; Zip Code<br>2816 Shamrock<br>Fort Worth, TX 76107                                |  |  |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Paper            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   | Office held:                                |
| Date<br>10/01/2010  | Payee name<br>Xpedx   |  |  |   |
| Amount (\$)<br>\$22.92  | Payee address City; State; Zip Code<br>2816 Shamrock<br>Fort Worth, TX 76107                                |  |  |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Paper            |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH          | Candidate / Officeholder name   |  | Office sought:   | Office held:                                |

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| <b>1</b> PAGE #<br>Schedule: 1/6 Report: 207/212  |  | <b>2</b> FILER NAME<br>Davis, Wendy R.  |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095   |  |
| <b>4</b> Date<br>11/03/2010   |  | <b>5</b> Payee name<br>Aaron Brothers   |  |   |  |
| <b>6</b> Amount (\$)<br>\$132.00<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address City; State; Zip Code<br>4701 West Fwy<br>Fort Worth, TX 76107                     |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE   |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Framing for district office      |  |
| Date<br>09/14/2010  |  | Payee name<br>Amtrak  |  |   |  |
| Amount (\$)<br>\$31.00<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended           |  | Payee address City; State; Zip Code<br>60 Massachusetts Ave NE 4th Fl W<br>Washington, DC 20002           |  |   |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Staff transportation - Austin to Fort Worth |  |
| Date<br>09/09/2010  |  | Payee name<br>AT&T  |  |   |  |
| Amount (\$)<br>\$163.16<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address City; State; Zip Code<br>1801 Valley View Ln<br>Dallas, TX 75254                            |  |   |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Officeholder telephone service              |  |
| Date<br>09/15/2010  |  | Payee name<br>AT&T Store  |  |   |  |
| Amount (\$)<br>\$215.42<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address City; State; Zip Code<br>2834 S Hulen St<br>Fort Worth, TX 76109-1514                       |  |   |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Mobile phone                                |  |

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

|  |  |  |  |   |
|--|--|--|--|---|
| <b>1</b> PAGE #<br>Schedule: 2/6 Report: 208/212   |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>11/15/2010  | <b>5</b> Payee name<br>Calloway's  |  |  |   |
| <b>6</b> Amount (\$)<br>\$75.76<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address City; State; Zip Code<br>2651 S Hulen<br>Fort Worth, TX 76109                     |  |  |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Gifts for staff |   |
| Date<br>10/05/2010   | Payee name<br>Cat City Grill   |  |  |   |
| Amount (\$)<br>\$149.19<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         | Payee address City; State; Zip Code<br>1208 Magnolia Ave Ste 120<br>Fort Worth, TX 76104                 |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting     |   |
| Date<br>08/18/2010   | Payee name<br>Enoteca Vespaio  |  |  |   |
| Amount (\$)<br>\$150.53<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         | Payee address City; State; Zip Code<br>1610 S Congress Ave<br>Austin, TX 78704                           |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting     |   |
| Date<br>12/10/2010   | Payee name<br>Enoteca Vespaio  |  |  |   |
| Amount (\$)<br>\$87.95<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address City; State; Zip Code<br>1610 S Congress Ave<br>Austin, TX 78704                           |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting     |   |



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

|  |  |  |  |   |
|--|--|--|--|---|
| <b>1</b> PAGE #<br>Schedule: 3/6 Report: 209/212   |  | <b>2</b> FILER NAME<br>Davis, Wendy R. |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095 |
| <b>4</b> Date<br>12/30/2010  | <b>5</b> Payee name<br>Enoteca Vespaio   |  |  |   |
| <b>6</b> Amount (\$)<br>\$77.97<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address City; State; Zip Code<br>1610 S Congress Ave<br>Austin, TX 78704          |  |  |   |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for meeting with staff |   |
| Date<br>09/01/2010   | Payee name<br>Mac's on 7th   |  |  |   |
| Amount (\$)<br>\$114.72<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         | Payee address City; State; Zip Code<br>2600 W 7th<br>Fort Worth, TX 76107                        |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting                 |   |
| Date<br>11/05/2010   | Payee name<br>Mac's on 7th   |  |  |   |
| Amount (\$)<br>\$57.79<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address City; State; Zip Code<br>2600 W 7th<br>Fort Worth, TX 76107                        |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting                 |   |
| Date<br>10/04/2010   | Payee name<br>Office Depot   |  |  |   |
| Amount (\$)<br>\$25.99<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                       |  |  |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Event Expense                    |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Event supplies: Nametags paper pens    |   |

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| <b>1</b> PAGE #<br>Schedule: 4/6 Report: 210/212   |  | <b>2</b> FILER NAME<br>Davis, Wendy R.  |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095  |  |
| <b>4</b> Date<br>10/04/2010  |  | <b>5</b> Payee name<br>Office Depot   |  |  |  |
| <b>6</b> Amount (\$)<br>\$66.99<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                       |  |  |  |
| <b>8</b> PURPOSE OF EXPENDITURE  |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies |  |
| Date<br>10/04/2010   |  | Payee name<br>Office Depot  |  |  |  |
| Amount (\$)<br>\$130.13<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         |  | Payee address City; State; Zip Code<br>401 Carroll<br>Fort Worth, TX 76107                                |  |  |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Office supplies            |  |
| Date<br>07/15/2010   |  | Payee name<br>Parkside  |  |  |  |
| Amount (\$)<br>\$75.22<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address City; State; Zip Code<br>301 E 6th St<br>Austin, TX 78701                                   |  |  |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                     |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting     |  |
| Date<br>08/13/2010   |  | Payee name<br>Patrizio's  |  |  |  |
| Amount (\$)<br>\$210.54<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         |  | Payee address City; State; Zip Code<br>2932 Crockett Ave<br>Fort Worth, TX 76107                          |  |  |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                     |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting     |  |

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1</b> PAGE #<br>Schedule: 5/6 Report: 211/212   |  | <b>2</b> FILER NAME<br>Davis, Wendy R.   |  | <b>3</b> ACCOUNT # (TEC filers)<br>00062095   |  |
| <b>4</b> Date<br>12/09/2010  |  | <b>5</b> Payee name<br>Perlas Seafood and Oyster   |  |   |  |
| <b>6</b> Amount (\$)<br>\$96.92<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address City; State; Zip Code<br>1400 S Congress B100<br>Austin, TX 78704         |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE  |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting |  |
| Date<br>11/04/2010   |  | Payee name<br>So 7 Bistro  |  |   |  |
| Amount (\$)<br>\$137.00<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         |  | Payee address City; State; Zip Code<br>2401 W 7th Ste 117<br>Fort Worth, TX 76107                |  |   |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting            |  |
| Date<br>11/04/2010   |  | Payee name<br>Starbucks  |  |   |  |
| Amount (\$)<br>\$13.90<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address City; State; Zip Code<br>7th & Carroll St<br>Fort Worth, TX 76107                  |  |   |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Constituent meetings coffee       |  |
| Date<br>11/29/2010   |  | Payee name<br>Terra Mediterranean  |  |   |  |
| Amount (\$)<br>\$87.94<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address City; State; Zip Code<br>2973 Crockett<br>Fort Worth, TX 76107                     |  |   |  |
| PURPOSE OF EXPENDITURE   |  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense            |  | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting            |  |

POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS

SCHEDULE G

| EXPENDITURE CATEGORIES |                               |                                  |  |
|------------------------|-------------------------------|----------------------------------|--|
| Advertising Expense    | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking     | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense     | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense          | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                   | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The INSTRUCTION GUIDE explains how to complete this form.

|   |                                 |                                      |
|---|---------------------------------|--------------------------------------|
| 1 PAGE #<br>Schedule: 6/6 Report: 212/212 | 2 FILER NAME<br>Davis, Wendy R. | 3 ACCOUNT # (TEC filers)<br>00062095 |
|---|---------------------------------|--------------------------------------|

|                      |                                     |
|----------------------|-------------------------------------|
| 4 Date<br>08/24/2010 | 5 Payee name<br>Tillman's Roadhouse |
|----------------------|-------------------------------------|

|  |   |
|--|---|
| 6 Amount (\$)<br>\$193.66<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address City; State; Zip Code<br>2933 Crockett St<br>Fort Worth, TX 76107 |
|--|---|

|                          |   |  |
|--------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Meal for staff meeting |
|                          |   |  |