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

RECEIVED
APR 3 2006
CITY SECRETARY

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 ACCOUNT #	2 Total pages filed: 5	OFFICE USE ONLY
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: MR. FIRST: BRUCE MI: K. NICKNAME LAST: TATRO SUFFIX	Date Received
4 ORIGINAL REPORT TYPE	[X] January 15 [ ] Runoff [ ] Other (specify) [ ] July 15 [ ] Exceeded $500 limit [ ] 30th day before election [ ] 15th day after treasurer appointment (officeholder only) [ ] 8th day before election [ ] Final report	Date Hand-delivered or Date Postmarked; Receipt # / Amount; Legal / Totals
5 ORIGINAL PERIOD COVERED	Month Day Year 11/28/2003 THROUGH Month Day Year 12/31/2003	Date Processed; Date Imaged

6 EXPLANATION OF CORRECTION CORRECTION TO 2 EXPENDITURES (ITEMS #1 & #2 AS SUBMITTED) REPORTED ON CORRECTION AFFIDAVIT SUBMITTED 12/27/2005.
#1) THE ORIGINAL CAMPAIGN REPORT WAS SUBMITTED CORRECTLY, THEREFORE THIS CORRECTION IS TO "BACK OUT" THE PREVIOUS CORRECTION SUBMITTED 12/27/2005. PAGE 3 OF 8 - SCHEDULE F - EXPENDITURE FOR $718.07 SHOULD BE ON THE REPORT AS ORIGINALLY REPORTED. REIMBURSEMENT SHOULD BE REPORTED ON SCHEDULE F.
#2) PAGE 5 OF 8 - SCHEDULE F - EXPENDITURE FOR $224.35 SHOULD BE REPORTED ON SCHEDULE F. - THE ORIGINAL EXPENDITURE (FROM PERSONAL FUNDS) IS REPORTED ON SCHEDULE G AND THE REIMBURSEMENT SHOULD BE REPORTED ON SCHEDULE F THEREFORE THIS REIMBURSEMENT TRANSACTION SHOULD BE REPORTED ON SCHEDULE F. #3) REVISED COVERSHEET Pg 2 - INCREASE IN TOTAL EXPENDITURES

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

LAURA A. HASKINS NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 03-14-2010

Check ONLY if applicable:

[X] I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me by BRUCE TATRO this the 2 day of APRIL, 20 06, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Laura A. Haskins	LAURA A. HASKINS	NOTARY PUBLIC

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Revised 09/20/2005

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

NOTE: CHANGE OF ADDRESS

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 4

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: BRUCE | MI: K.

NICKNAME | LAST: TATRO | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☒ Change of Address

ADDRESS / PO BOX: 1471 C SPRINGROCK LANE | APT / SUITE #: | CITY: HOUSTON | STATE: TX | ZIP CODE: 77055

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (713) | PHONE NUMBER: 984-1234 | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: CECILIA | MI: A.

NICKNAME | LAST: TATRO | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 1471 C SPRINGROCK LANE | APT / SUITE #: | CITY: HOUSTON | STATE: TX | ZIP CODE: 77055

8 CAMPAIGN TREASURER PHONE

AREA CODE: (713) | PHONE NUMBER: 984-1234 | EXTENSION

9 REPORT TYPE

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

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

10 PERIOD COVERED

Month Day Year: 11/28/2003 THROUGH Month Day Year: 12/31/2003

11 ELECTION

ELECTION DATE Month Day Year: ~~11/28/2003~~

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

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

Name

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

☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: BRUCE K. TATRO

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ Ø
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 32,145.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ Ø
	4. **TOTAL POLITICAL EXPENDITURES**	$ 42,323.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4,640.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

19 AFFIDAVIT

LAURA A. HASKINS
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 03-14-2010

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.

Bruce Tatro
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said BRUCE TATRO, this the 2 day of APRIL, 20 06, to certify which, witness my hand and seal of office.

Laura A. Haskins — LAURA A. HASKINS — NOTARY PUBLIC

Signature of officer administering oath — Printed name of officer administering oath — Title of officer administering oath

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 8 3/8

2 FILER NAME: BRUCE TATRO

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/5/03	COWART AND ASSOCIATES 6918 STONEY RIVER SPRING TX 77379	2,000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/5/03	BRUCE TATRO 1505 WHISPERING PINES HOUSTON TX 77055	718.07

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT OF PREVIOUS EXPENSES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/5/03	WC MANAGEMENT 402 WEST 16TH ST. HOUSTON TX 77008	920.84

Purpose of payment (See instructions regarding type of information required.): LIST OF PHONE #'S

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8/03	ADVANTAGE, INC 1611 N. KENT STREET, SUITE 905 ARLINGTON VIRGINIA 22209	2,605.92

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 8 5/8

2 FILER NAME: BRUCE TATRO

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/10/03	NANCY BREWER 5306 DEMILO HOUSTON TX 77092	33.00

8 Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT COUNCIL BREAKFAST

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/03	BRUCE TATRO 1505 WHISPERING PINES HOUSTON TX 77055	224.35

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT FOR AUTOMOBILE INSURANCE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/03	JOE FLORES 5306 DEMILO HOUSTON TX 77092	372.00

Purpose of payment (See instructions regarding type of information required.): CAMPAIGN SIGNS - LABOR

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/13/03	FUDDRUCKER'S 3929 SOUTHWEST FRWY HOUSTON TX 77027	16.29

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED