BusCAR

Business Committee Against Rail

12651 Briar Forest Drive #153
Houston, TX 77077
July 23, 2001

Ms. Anna Russell
City Secretary
City of Houston
900 Bagby Street
Houston, TX 77002

This letter will serve as the official transmittal of our July 15,2001 filing of the BusCAR Special Purpose Political Action Committee financial activities as required by the Texas Ethics Commission.

David W. Hutzelman
Executive Director, BusCAR

Attached SPAC Forms

Received by City Secretary _____ _____
Signed date / time

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

AFFIDAVIT FOR COMMITTEE THAT DOES NOT USE COMPUTER EQUIPMENT

OFFICE USE ONLY

Date Received: RECEIVED JUL 23 2001 SECRETARY OF STATE

Date Hand-Delivered or Date Postmarked

Date Processed

Date Imaged

Filer name	Account #
BUSCAR - Business Committee Against RAIL	

I swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or contributors.

I further swear or affirm that no person acting as the committee's agent or consultant or a person with whom the committee contracts uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contribuitons to the committee.

I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.

I am filing this affidavit with the July 15, 2001 report. I understand that this affidavit is required to be filed with each campaign finance report for which the committee is claiming an exemption from electronic filing.

Signature of Campaign Treasurer

NAOMI ALLEN
Notary Public
State of Texas
My Commission Expires
August 17, 2003

NOTARY STAMP / SEAL

Sworn to and subscribed before me by David W. Hutzelman this the 23rd day of July, 2001, 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
	Naomi Allen	Notary Public

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER.

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 12

3 COMMITTEE NAME: BUS CAR - BUSINESS COMMITTEE AGAINST RAIL

OFFICE USE ONLY

Date Received: RECEIVED JUL 25 2001

Date Hand Delivered or Postmarked

Received By | Amount

Date Processed

Date Imaged

4 COMMITTEE ADDRESS
☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
12415 WOODTHORPE HOUSTON TX 77024

5 CAMPAIGN TREASURER NAME

TITLE FIRST DAVID MI W
NICKNAME LAST HUTZELMAN SUFFIX

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
12415 WOODTHORPE HOUSTON TX 77024

7 CAMPAIGN TREASURER'S MAILING ADDRESS
☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
12415 WOODTHORPE HOUSTON TX 77024

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 464 6603

9 REPORT TYPE

- ☐ January 15
- ☒ July 15
- ☐ 30th day before election
- ☐ 8th day before election
- ☐ Runoff
- ☐ Exceeded $500 limit
- ☐ Dissolution (attach PAC-DR)
- ☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 1 / 1 / 01 THROUGH Month Day Year: 7 / 01 / 01

11 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME BUSCAR – BUSINESS COMMITTEE AGAINST RAIL

ACCOUNT # (Ethics Commission filers)

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)

- [ ] SUPPORT
- [x] OPPOSE
- [ ] ASSIST (officeholders only)

- [ ] CANDIDATE — CANDIDATE / OFFICEHOLDER NAME
- [ ] OFFICEHOLDER — OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
- [x] MEASURE — BALLOT IDENTIFICATION / # ; ELECTION DATE Month / Day / Year

DESCRIPTION SUPPORT REFERENDUM ON MAIN STREET LIGHT RAIL PROJECT

14 NO REPORTABLE ACTIVITY

- [ ] Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

15 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 110.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2688.64

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ -
4.	**TOTAL POLITICAL EXPENDITURES**	$ 2654.23

OUTSTANDING LOAN TOTALS

5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

16 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.

NAOMI ALLEN
Notary Public
State of Texas
My Commission Expires
August 17, 2003

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David W. Hutzelman, this the 23rd day of July, 20 01, to certify which, witness my hand and seal of office.

Signature of officer administering oath — Naomi Allen, Printed name of officer administering oath — Notary Public, Title of officer administering oath

Revised 04/10/2000

Printed on recycled paper

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME BUS CAR
D.W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/10/01	PETER ELLOWAY [redacted] HOUSTON TX 77019	50.00 CHECK	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/12/01	ELEANOR CULBERSON [redacted] HOUSTON TX 77079	$25.00 CHECK	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/10/01	GRAYSON MOSS [redacted] BELLAIRE TX 77401	25.00 CHECK	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/12/01	MAYOR BROWN LET THE PEOPLE VOTE PAC JIMMY DUNNE - TREAS [redacted] HOUSTON TX 77077	$168.49 CHECK	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/15/01	MRS. G.E. ARNOTT [redacted] HOUSTON TX 77061	$50.	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME BUS CAR PAC
D.W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/10/01	PAIGE MOORE [redacted] HOUSTON TX 77042	$25.00 CHECK	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/10/01	JEFFREY N DAILY [redacted] HOUSTON TX 77057	$100.00 CHECK	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/10/01	SPENCE KERRIGAN [redacted] HOUSTON TX 77080	25.00 CASH	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/12/01	RICHARD ANDERSON [redacted] HOUSTON TX 77004	25.00 CHECK	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/12/01	J.D JONES [redacted] MONTGOMERY, TX 77356	100.00 CHECK	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME BUSCAR
D. W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/15/01	OTTO S. GLASER [redacted] HOUSTON TX 77024	$ 25.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/13/01	JOHN C. STRICKLAND [redacted] HOUSTON TX 77036	$ 10.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/26/01	WANDA SCHUTZ [redacted] HOUSTON TX 77025	$ 50.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/26/01	EARL LAIRSON [redacted] HOUSTON TX 77292	$ 100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/15/01	M. H. JAMES JR [redacted] HOUSTON TX 77004	$ 500.00	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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

CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE C

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule C:

2 FILER NAME
D.W. HUTZELMAN, TREA.
BUSCAR - BUSINESS COMMITTEE AGAINST RAIL

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Corporation / Labor Organization name 6 Corporation / Labor Organization address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/24/01	BAYOU CITY FORD/STERLING [redacted] HOUSTON TX 77226	$100.00	
3/28/01	HARTMAN MGMT [redacted] HOUSTON TX 77043	$1,000.00	
5/14/01	HADI DHUKKA - A[illegible] CONVENIENCE MKT [redacted] HOUSTON TX	$200.00	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Printed on recycled paper

Revised 1997

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME D. W. HUTZELMAN, TREAS
BUSCAR - BUSINESS COMMITTEE AGAINST RAL

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan: 4/3/01

6 Is lender a financial Institution? Y (N)

7 Name of lender: D.W. HUTZELMAN ☐ out-of-state PAC (ID#:_____)

8 Lender address; City; State; Zip Code: 12415 WOODTHORPE HOUSTON TX 77024

9 Loan Amount ($): $500.00

10 Interest rate: -0-0

11 Maturity date: ASAP

12 Description of Collateral ☐ none

13 GUARANTOR INFORMATION ☐ not applicable

14 Name of guarantor

15 Guarantor address; City; State; Zip Code

16 Amount Guaranteed ($)

17 Principal Occupation

18 Employer

Date of loan

Name of lender ☐ out-of-state PAC (ID#:_____)

Loan Amount ($)

Is lender a financial Institution? Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Description of Collateral ☐ none

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation

Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME BUS CAR
D.W HUTZERMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/8/01	OFFICE DEPOT WEST 34ST HOUSTON TX	$ 38.35

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

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 ($)
01/07/01	CINDY GINGERICH 2847 PEPPERWOOD SUGAR LAND TX 77479	$ 45.00

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

-- 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 ($)
01/07/01	PATTY RODRIGUEZ 8041 ELROD HOUSTON TX 77017	$ 63.00

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

-- 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 ($)
01/07/01	BRENDA OLIVARES-CRUZ 11838 STONE BRIDGE HOUSTON TX 77064	432.00

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME BUSCAR - BUSINESS COMMITTEE AGAINST RAIL
D.W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/29/01	MARK KOSMOSKI CITY HALL, HOUSTON TX	$ 10.00

8 Purpose of payment (See instructions regarding type of information required.)
LAWSUIT - WITNESS FEE

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 ($)
2/7/01	D.W. HUTZELMAN 12415 WOODTHORPE HOUSTON TX 77024	$ 500.00 (NOT AN EXPENDITURE)

Purpose of payment (See instructions regarding type of information required.)
REPAYMENT OF $500 LOAN 1-05-01

-- 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 ($)
2/20/01	SCOTT HUTCHINSON HOUSTON TX	$ 239.12

Purpose of payment (See instructions regarding type of information required.)
REIMBURSEMENT FOR
HCAD DISK PURCHASE
KINKO'S COMPUTER TIME

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/19/01	MAIL SERVICES PO BOX 15180 HOUSTON TX 77220	$ 321.28

Purpose of payment (See instructions regarding type of information required.)
MAILING OF BUSCAR PROPERTY OWNERS PACKET

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME BUSCAR - BUSINESS COMMITTEE AGAINST RAIL D. W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/17/01	CASH - METROPOLITAN TRANSIT AUTHORITY HOUSTON TX	$ 48.88

8 Purpose of payment (See instructions regarding type of information required.)
FEDERAL "NEW STARTS" REPORT

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 ($)
1/18/01	CHARES BADALISSE - DISTRICT CLERK HARRIS COUNTY TX	$ 26.00

Purpose of payment (See instructions regarding type of information required.)
LEGAL FILING FEES
(REIMBURSE CLAYTON TROTTER)

•• 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 ($)
1/18/01	NACE INTERNATIONAL 1440 SOUTH CREEK HOUSTON TX 77084	$ 86.60

Purpose of payment (See instructions regarding type of information required.)
STRAY CURRENT CORROSION STUDY

•• 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 ($)
1/29/01	DON STANKOWSKI METRO, HOUSTON TX	$ 10.00

Purpose of payment (See instructions regarding type of information required.)
LAWSUIT - WITNESS FEE

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME BUSCAR- ROSNER COMMITTE AGAINST RAIL
D. W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/19/01	MINUTEMAN PRESS P.O. BOX 15180 HOUSTON TX	$ 300.00

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

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 ($)
4/4	BRISCO SWAN 1925 WEST LOOP N HOUSTON TX	$ 500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/16/01	MINUTEMAN PRESS P.O. BOX 15180 HOUSTON TX 77220	$ 189.03

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/24/01	D.W. HUTZELMAN 12415 WOODTHORPE HOUSTON TX 77024	$ 500.00 (NOT AN EXPENDITURE)

Purpose of payment (See instructions regarding type of information required.)
REPAYMENT OF LOAN OF 4/3/01

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME BUS CAR - BUSINESS COMMITTEE AGAINST RAIL D. W. HUTZELMAN, TREAS

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5-15-01	BRUSCE SWAN 1925 NORTH LOOP WEST HOUSTON TX	$ 200.00

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

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 ($)
1-01 THRU 7-01	WASHINGTON MUTUAL TOWN & COUNTRY BLVD HOUSTON TX 77024	$ 145.00

Purpose of payment (See instructions regarding type of information required.)
CHECKING AND BANK CHARGES

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

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

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

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

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

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED