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

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH COVER SHEET PG 2**

14 C/OH NAME: Michael Berry

15 ACCOUNT # (Ethics Commission filers):

16 SUPPORTING POLITICAL COMMITTEE(S)

•• This listing includes 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 | COMMITTEE NAME |
| ☐ SPECIFIC | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| ☐ additional pages | COMMITTEE CAMPAIGN TREASURER ADDRESS |

17 NO REPORTABLE ACTIVITY

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

| | | | |
|---|---|---|---|
| 18 CONTRIBUTION TOTALS | 1. | TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | $ |
| | 2. | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 48,424.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED | $ |
| | 4. | **TOTAL POLITICAL EXPENDITURES** | $ 36,335.86 |
| OUTSTANDING LOAN TOTALS | 5. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ |

19 AFFIDAVIT

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

ELLA M SCHUBERT NOTARY PUBLIC State of Texas Comm. Exp. 12/06/2004

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Berry, this the 15th day of July, 20 02, to certify which, witness my hand and seal of office.

| Ella M. Schubert | Ella M. Schubert | Notary Public |
|---|---|---|
| Signature of officer administering oath | Printed name of officer administering oath | Title of offider administering oath |



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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/3/02 | William Vanpelt<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/7/02 | Continental Airlines Inc. Employee Fund For A Better America PAC<br>Contributor address; City; State; Zip Code<br>[redacted] | $2,500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/8/02 | Patrick Studdert<br>Contributor address; City; State; Zip Code<br>[redacted] | $2,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/8/02 | Stanford Alexander<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/10/02 | New Century Project Committee<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
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|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/11/02 | Fritz Beich<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/14/02 | AUS-TEX Electric, Inc.<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/14/02 | Ousley Lacy<br>Contributor address; City; State; Zip Code<br>[redacted] | $300.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/14/02 | H-CAR PAC<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/14/02 | Daniel Lynch<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.

Total pages this Schedule A1: 21

ACCOUNT # (Ethics Commission filers)

FILER NAME: Michael Berry

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 1/14/02 | D. J. Blanton | | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 1/14/02 | Richard Battle | | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 1/14/02 | Michael Cummings | | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 1/14/02 | Era Land | | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 1/14/02 | Christus Powell | | $1,000.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/14/02 | Burk's Water Service & Utility Co. | $300.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/16/02 | Jenkens & Gilchrist PAC | $500.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/16/02 | Charles Rash | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/17/02 | Kenneth Ulmer | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/17/02 | Carol Walker | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/17/02 | Smith Dudley<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/22/02 | Delaware North Companies, Inc. PAC<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/25/02 | Rudolph Bruhns<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/30/02 | David Mahaffay<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/30/02 | Fulbright & Jaworski LLP Texas Committee<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

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|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 1/30/02 | Daniel Brooks<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/3/02 | Marc Folladori<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/5/02 | Max Watson<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/9/02 | Charles Gooden<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/11/02 | LAN-PAC<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/16/02 | Pavani Mahadass<br>Contributor address; City; State; Zip Code<br>[redacted] | $150.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/25/02 | Robert Ryan<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/25/02 | Percy Jackson<br>Contributor address; City; State; Zip Code<br>[redacted] | $50.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/25/02 | Texas Coalition For Good Government<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/26/02 | C.M. (Mike) Garver<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/26/02 | Don Hornbeck | $25.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/26/02 | Paul Van Slyke | $150.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/26/02 | Judith Snively | $1,000.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/26/02 | Waste Management PAC | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/27/02 | Charles Holm | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/28/02 | Radio One of Texas L.P.<br>Contributor address; City; State; Zip Code<br>[redacted] | $80.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/28/02 | Charles Rash<br>Contributor address; City; State; Zip Code<br>[redacted] | $200.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/28/02 | Bettina Fowkes<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 2/28/02 | Linebarger Goggan Blair Pena & Sampson LLP<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/1/02 | Gus Kanakis<br>Contributor address; City; State; Zip Code<br>[redacted] | $25.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/1/02 | Parsons Corporation PAC<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | PHCG Investments<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | Terry Looper<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | Jorge Casimiro<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | Gerald Brady<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | Ranney McDonough<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/4/02 | Reddy Partnership<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Clay Hoster<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Arturo De Leon<br>Contributor address; City; State; Zip Code<br>[redacted] | $50.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Jennifer Sickler<br>Contributor address; City; State; Zip Code<br>[redacted] | $200.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Janiece Longoria | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | CDMPAC | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Mark Boyer | $500.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Vidal Martinez | $319.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Juan Cabrera | $500.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | |
| Principal occupation (Optional) | Employer (Optional) | | |

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| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Barron Walber<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | [redacted]emachandra Kolluru<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Christian Vandaele<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Ramesh Gunda<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Roland Garcia<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.

Total pages this Schedule A1: 21

FILER NAME: Michael Berry

ACCOUNT # (Ethics Commission filers)

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 3/5/02 | Barry Mandel | | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 3/5/02 | V.N. Vijayvergiya | | $2,500.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 3/5/02 | Herbert Johnson | | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 3/5/02 | Marc Nathan | | $250.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 3/5/02 | Charles Foster | | $100.00 | |
| | Contributor address; City; State; Zip Code [redacted] | | | |
| Principal occupation (Optional) | | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.

Total pages this Schedule A1: 21

FILER NAME: Michael Berry

ACCOUNT # (Ethics Commission filers)

| Date | Full name of contributor | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Jonathan Day ☐ out of state PAC<br>Contributor address; City; State; Zip Code [redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/5/02 | Walter Zivley ☐ out of state PAC<br>Contributor address; City; State; Zip Code [redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/6/02 | Johnny Baker ☐ out of state PAC<br>Contributor address; City; State; Zip Code [redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/6/02 | Locke Liddell & Sapp LLP ☐ out of state PAC<br>Contributor address; City; State; Zip Code [redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/7/02 | James Jard ☐ out of state PAC<br>Contributor address; City; State; Zip Code [redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/7/02 | Wilson Griffith<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/8/02 | Lonnie Parr<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/8/02 | Wilford Weber<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/8/02 | Stephen Fraga<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/8/02 | John Cohan<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/10/02 | James Reinhartsen ☐ out of state PAC<br>[redacted] | $200.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |
| 3/11/02 | Irene Foxhall ☐ out of state PAC<br>[redacted] | $1,500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |
| 3/11/02 | Jerry Kane ☐ out of state PAC<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |
| 3/12/02 | Scott Rubenstein ☐ out of state PAC<br>[redacted] | $200.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |
| 3/13/02 | Tracy Nixon ☐ out of state PAC<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Dudley Smith<br>Contributor address; City; State; Zip Code<br>[redacted] | $200.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Marcus Watts<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Howard Horne<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Jeffrey Bricker<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Johnny Tates<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/25/02 | Robert Cohen<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/28/02 | Barbara Sklar<br>Contributor address; City; State; Zip Code<br>[redacted] | $500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/31/02 | Keli Sue Viereck<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 3/31/02 | Michael Appel<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/2/02 | Vijay Pallod<br>Contributor address; City; State; Zip Code<br>[redacted] | $100.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/3/02 | Dorothy Caram<br>Contributor address; City; State; Zip Code<br>[redacted] | $25.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/3/02 | Kenneth James<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,500.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/3/02 | Stanford Alexander<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/4/02 | Morris Architects Civic Action Fund<br>Contributor address; City; State; Zip Code<br>[redacted] | $250.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

| Date | Full name of contributor ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|
| 4/4/02 | Adams Insurance Service<br>Contributor address; City; State; Zip Code<br>[redacted] | $1,000.00 | |
| Principal occupation (Optional) | Employer (Optional) | | |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**
(FOR FORMS C/OH & SPAC)

| The Instruction Guide explains how to complete this form. | Total pages this Schedule A1: 21 |
|---|---|
| FILER NAME: Michael Berry | ACCOUNT # (Ethics Commission filers) |

| Date | Full name of contributor | ☐ out of state PAC | Amount of contribution ($) | In-kind contribution description (if available) |
|---|---|---|---|---|
| 4/4/02 | Marc Campos | | $250.00 | |
| | Contributor address; City; State; Zip Code<br>[redacted] | | | |

| Principal occupation (Optional) | Employer (Optional) |
|---|---|
| | |

Delaware North Companies, Incorporated Political Action Committee
438 Main Street, Buffalo, New York 14202
(716) 858-5000

April 23, 1999

**Certified Mail**
**Return Receipt Requested**

Federal Election Commission
999 E. Street, NW
Washington, DC 20463

RE: Delaware North Companies, Incorporated
Political Action Committee ("DNCI PAC")/FEC # C00158899

Dear Sir or Madam:

As directed in the attached Proceeding, the following information in our Statement of Organization has changed effective April 22, 1999:

| | | |
|---|---|---|
| Treasurer and Secretary | - | Terry C. Burton<br>Delaware North Companies, Inc.<br>438 Main Street<br>Buffalo, NY 14202 |
| Assistant Treasurer | - | Janice R. Trybus<br>Delaware North Companies, Inc.<br>438 Main Street<br>Buffalo, NY 14202 |
| Director and Member of Steering Committee | | John P. Fernbach<br>Delaware North Companies, Inc.<br>438 Main Street<br>Buffalo, NY 14202 |
| | | Dennis J. Szefel<br>Delaware North Companies, Inc.<br>438 Main Street<br>Buffalo, NY 14202 |

David J.G. Chambers resigned as Secretary and Treasurer effective December 31, 1998 and Michael J. Gallagher resigned as Assistant Treasurer effective April 22, 1999.

Very truly yours,

DELAWARE NORTH COMPANIES, INCORPORATED
POLITICAL ACTION COMMITTEE

By: Terry C. Burton

Terry C. Burton
Treasurer and Secretary

# PROCEEDINGS OF THE STEERING COMMITTEE

## Delaware North Companies, Incorporated

## Political Action Committee

## Good Government Fund

On the 22nd day of April, 1999, the members of the Steering Committee of the Delaware North Companies, Incorporated Political Action Committee Good Government Fund (the "PAC"), consisting of Richard T. Stephens and William J. Bissett, did formally and unanimously take the following action and as evidence of taking such action have affixed their signatures to these proceedings:

(1) Accept the resignation of David J.G. Chambers, as Secretary and Treasurer of the PAC effective December 31, 1998;

(2) Accept the resignation of Michael J. Gallagher, as Assistant Treasurer of the PAC effective April 22, 1999;

(3) Elect Terry C. Burton as Treasurer and Secretary of the PAC effective April 22, 1999;

(4) Elect Janice R. Trybus, Assistant Treasurer of the PAC effective April 22, 1999;

(5) Elect John P. Fernbach as director and a member of the Steering Committee of the PAC effective April 22, 1999;

(6) Elect Dennis J. Szefel as director and a member of the Steering Committee of the PAC effective April 22, 1999;

(7) On or after the date hereof, the officers of the PAC shall be:

| | | | |
|---|---|---|---|
| (a) | Richard T. Stephens | - | Chairman |
| (b) | Terry C. Burton | - | Secretary and Treasurer |
| (c) | Janice R. Trybus | - | Assistant Treasurer |

(11) Appoint Terry C. Burton, Treasurer, and Janice Trybus, Assistant Treasurer, as Custodians of the Delaware North Companies, Incorporated Political Action Committee Non-management Custodial Account, in accordance with Federal Election Commission regulations and guidelines governing "twice-yearly solicitations".

Richard T. Stephens

William J. Bissett

# NEW CENTURY PROJECT

John Kasich, Chairman

2021 E. Dublin-Granville Road, Suite 161 • Columbus, OH 43229 • Ph 614.785.1600 • Fax 614.785.1611
E-mail ncp@ee.net • www.newcenturyproject.org


October 23, 2001

Micheal Berry
223 Westheimer
Houston, TX 77006

Dear Micheal,

As the Treasurer for New Century Project, I am writing to certify that New Century Project is an "Out-of-State Committee" as described in the Texas Ethics Commission Rules, section 20.13.

Pursuant to Texas Election Code 253.032 (A), I have enclosed a list containing the full name and address of each person who contributed more than $100 to New Century Project during the 12 months immediately preceding October 23, 2001, the date of our $1,000 contribution to your campaign.

Please feel free to contact me if you have any further questions.

Sincerely,

Benjamin M. Kanzeg
Treasurer


NEW CENTURY PROJECT

John Kasich, Chairman

Ben Kanzeg
Treasurer

2021 E. Dublin-Granville Road • Suite 161 • Columbus, OH 43229
Ph 614.785.1600 • Fax 614.785.1611
ncp@ee.net • www.newcenturyproject.org


Paid for by New Century Project

| FULLNAME | ADDRESS1 | ADDRESS2 | CITY | STATE | ZIP |
|---|---|---|---|---|---|
| John C. Adams | 12 Cutters Run | | Barrington | IL | 60010 |
| Mike Parker | 50 Creekview Lane SE | | Brookhaven | MS | 39601 |
| Dale L. Fuller | 1130 Hillview Drive | | Menlo Park | CA | 94025 |
| William E. James | 31 Phillips Avenue | | Rockport | MA | 01966 |
| David A. Lamond | 115 Crown Terrace Blvd. | | San Francisco | CA | 94117 |
| John J. McMullen | 9204 Sloane Street | | Orlando | FL | 32827 |
| A. Malachi Mixon | 3105 Topping Lane | | Chagrin Falls | OH | 44022 |
| Joseph Paul Schoendorf | 931 Laurel Glen Drive | | Palo Alto | CA | 94304 |
| Tinkham Veale, II | 1700 Epping Road | P.O. Box 39 | Gates Mills | OH | 44040 |
| Christopher H. Young | 712 Bryant Street No. 1 | | San Francisco | CA | 94107 |

**NEW CENTURY PROJECT**

*John Kasich, Chairman*

Ben Konzeg
*Treasurer*

2021 E. Dublin-Granville Road • Suite 161 • Columbus, OH 43229
Ph 614.785.1800 • Fax 614.785.1611
ncp@oo.net • www.newcenturyproject.org

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# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

| | |
|---|---|
| 1. (a) NAME OF COMMITTEE IN FULL ☐ (Check if name is changed) Parsons Corporation Political Action Committee | 2. DATE December 29,2000 |
| (b) Number and Street Address ☐ (Check if address is changed) 100 W. Walnut Street | 3. FEC Identification Number C00103549 |
| (c) City, State and ZIP Code Pasadena, CA 91124 | 4. Is This Report An Amendment? ☒ YES ☐ NO |

5. TYPE OF COMMITTEE (Check one)

☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)

☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|---|---|---|---|
| | | | |

☐ (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.

☐ (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

☐ (e) This committee is a separate segregated fund.

☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|---|---|
| | | |

Type of Connected Organization

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

| Full Name | Mailing Address | Title or Position |
|---|---|---|

8. Treasurer: List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

| Full Name | Mailing Address | Title or Position |
|---|---|---|
| Robert W Jones | 100 W.Walnut Street,Pasadena,CA 91124 | Treasurer |
| Thomas L Johnson | ditto | Asst. Treasurer |

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

| Name of Bank, Depository, etc. | Mailing Address and ZIP Code |
|---|---|

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

| TYPE OR PRINT NAME OF TREASURER | SIGNATURE OF TREASURER | DATE |
|---|---|---|
| Robert W Jones | | December 29,2000 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-694-1100

FE3AN114PDF

**FEC FORM 1**
(revised 4/87)

99934493226

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

| | |
|---|---|
| 1. (a) NAME OF COMMITTEE IN FULL ☐ (Check if name is changed)<br>Waste Management Employees' Better Government Fund | 2. DATE<br>5/3/99 |
| (b) Number and Street Address ☐ (Check if address is changed)<br>601 Penn. Ave., NW Suite 300 North, Wash. DC 20004 | 3. FEC Identification Number<br>C00119008 |
| (c) City, State and ZIP Code | 4. Is This Report An Amendment?<br>☒ YES ☐ NO |

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

MAY 20 11 01 AM '99

5. TYPE OF COMMITTEE (Check one)

☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)

☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|---|---|---|---|
| | | | |

☐ (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.

☐ (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

☐ (e) This committee is a separate segregated fund.

☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|---|---|
| | | |

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name | Mailing Address | Title or Position

8. Treasurer: List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name | Mailing Address | Title or Position

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

| Name of Bank, Depository, etc. | Mailing Address and ZIP Code |
|---|---|
| Nations Bank | 730 Fifteenth Street, NW<br>First Floor<br>Washington, DC 20005 |

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

| TYPE OR PRINT NAME OF TREASURER | SIGNATURE OF TREASURER | DATE |
|---|---|---|
| Ronald H. Jones | Ronald H. Jones | 5/3/99 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-219-3420

FE6AN053

**FEC FORM 1**
(revised 4/87)

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

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 1/15 | Southwestern Bell<br>PO Box 4845 Dallas 77097 | 861.88 |

8 Purpose of expenditure (See instructions regarding type of information required.): phone service

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 1/15 | PV Rental<br>2015 Milam 77002 | 1032.37 |

Purpose of expenditure (See instructions regarding type of information required.): Van Rental

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 1/15 | Enterprise Car Rental<br>9430 Old Katy Fwy 77055 | 693.90 |

Purpose of expenditure (See instructions regarding type of information required.): Van Rental

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 1/15 | Office Depot<br>3401 Kirby 77098 | 142.87 |

Purpose of expenditure (See instructions regarding type of information required.): office supplies

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

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

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

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 1/15 | Cali Sandwiches<br>3030 Travis 77006 | 184 |

8 Purpose of expenditure (See instructions regarding type of information required.): refreshments

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 1/28 | CARL DAVIS<br>1423 Hawthorne #11 H TX 77006 | 1500 — |

Purpose of expenditure (See instructions regarding type of information required.): Consulting

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/1 | Dinosaur Plastics<br>4727 Gulf Fwy 77023 | 54.07 |

Purpose of expenditure (See instructions regarding type of information required.): Signs

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/1 | Galilee M BC<br>7926 Shotwell St. 77016 | 500 |

Purpose of expenditure (See instructions regarding type of information required.): table - pastor's installation

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

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# POLITICAL EXPENDITURES

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 2/1 | AB Comm<br>PO Box 307 Missouri City 77459 | 300 |

8 Purpose of expenditure (See instructions regarding type of information required.): Consulting

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/1 | Jeff Shook<br>610 Avondale 77006 | 3000 |

Purpose of expenditure (See instructions regarding type of information required.): Consulting

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/1 | NANDITA BERRY<br>223 Westheimer 77006 | 15,000 |

Purpose of expenditure (See instructions regarding type of information required.): loan repayment

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/1 | Southwestern Bell<br>PO Box 4845 Dallas TX 77097 | 800.63 |

Purpose of expenditure (See instructions regarding type of information required.): phone service

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

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# POLITICAL EXPENDITURES

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| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 2/24 | Houston Chronicle<br>801 Texas 77002 | 250.00 |

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

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 2/25 | Galleria<br>5075 Westheimer 77056 | 1500.00 |

Purpose of expenditure (See instructions regarding type of information required.)
Gifts - Team Member of Week

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/1 | US Post Office<br>401 Franklin 77002 | 340 |

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/1 | Camera Zone<br>unknown (NY, NY) | 468.64 |

Purpose of expenditure (See instructions regarding type of information required.)
photo eqpt.

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

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# POLITICAL EXPENDITURES

**SCHEDULE F**

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1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 3/9 | Billboard by Day<br>1237 Blalock Dr. 77088 | 2325.00 |

| 8 Purpose of expenditure (See instructions regarding type of information required.) | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| adverts | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/13 | Richmond Printing<br>5825 Schumacher 77057 | 5000.00 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| printing | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/13 | Houston Realty Breakfast<br>~~UNKNOWN~~ PO Box 27095 77227 | 180.00 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| membership | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/15 | Houston Livestock Show<br>~~UNKNOWN~~ PO Box 20070 | 120 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| event expenses | |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

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1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 3/16 | Don Aaron<br>Holly Hall, H, TX | 500 |

| 8 Purpose of expenditure (See instructions regarding type of information required.) | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| consulting | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/15 | Jewish Herald Voice<br>3403 Audley 77098 | 105 -- |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| adverts | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 3/25 | Kaye Marvin<br>4401 Montrose 77006 | 464.94 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| Photos | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 4/1 | Amy Jones<br>PO Box 4726 77502 | 1000 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| consulting | |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

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1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 4/1 | ~~Robbie~~ Ruby Blackmon<br>UNKNOWN | 60 |

| 8 Purpose of expenditure (See instructions regarding type of information required.) | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| consulting | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 4/1 | Pearly Savage<br>UNKNOWN | 60 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| consulting | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 4/1 | LULAC<br>2900 Woodridge 77087 | 100 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| Parade expenses | |

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 4/16 | Video News Clips<br>6300 Richmond Ave #204 77057 | 350 |

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| video services | |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

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1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 4/27 | KTSU Radio<br>3100 Cleburne 77004 | 150.00 |

8 Purpose of expenditure (See instructions regarding type of information required.): membership drive

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 5/23 | Walgreens<br>3317 Montrose 77006 | 88.77 |

Purpose of expenditure (See instructions regarding type of information required.): pictures

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 5/23 | Walgreens<br>3317 Montrose 77006 | 29.63 |

Purpose of expenditure (See instructions regarding type of information required.): pictures

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

| Date | Payee name / Payee address; City; State; Zip Code | Amount ($) |
|---|---|---|
| 5/20 | FAST SIGNS<br>5020 Kirby 77005 | 102.84 |

Purpose of expenditure (See instructions regarding type of information required.): Signs

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

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# POLITICAL EXPENDITURES

**SCHEDULE F**

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1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

| 4 Date | 5 Payee name / 6 Payee address; City; State; Zip Code | 7 Amount ($) |
|---|---|---|
| 5/27 | US Post Office<br>401 Franklin 77002 | 102 |

| 8 Purpose of expenditure (See instructions regarding type of information required.) | 9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| Stamps | |

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

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| | |

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

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| | |

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

| Purpose of expenditure (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / held |
|---|---|
| | |

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