



# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM SPAC COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> John Castillo Legal Defense Fund	<b>13 ACCOUNT #</b> (Ethics Commission filers)
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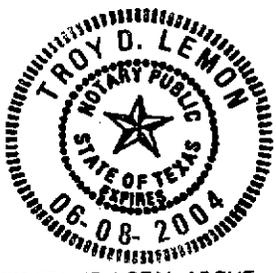
**14 NO REPORTABLE ACTIVITY**  Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,000.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,000.00
<b>OUTSTANDING LOAN TOTALS</b>	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 32,500.00

**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.

Maria E. Hillje  
Signature of campaign treasurer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARIA Hillje this the 15<sup>th</sup> day of JANUARY, 15 2002, to certify which, witness my hand and seal of office.

Troy D. Lemon  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 1	
2 FILER NAME <i>John Castillo Legal Defense Fund</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC <i>David F. Martinez</i>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code [REDACTED] <i>Houston, TX 77060</i>	<i>\$2,000.00</i>	
9 Principal occupation <i>Engineer</i>		10 Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC <i>David E. Walden</i>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code [REDACTED] <i>Houston, TX 77096</i>	<i>\$1,000.00</i>	
Principal occupation <i>consultant</i>		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Principal occupation		Employer (optional)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Principal occupation		Employer (optional)	

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

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages this Schedule I: <u>1</u>
2 FILER NAME <u>John Castillo Legal Defense Fund</u>	3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name <u>Bennett and Seacrest</u>	8 Amount (\$) <u>\$ 8,000.00</u>
	6 Payee address: <u>808 Travis</u> City: <u>Aouston,</u> State: <u>TX</u> Zip Code: <u>77001</u>	
	7 Purpose of expenditure <u>Legal Defense Fees</u>	

Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	
	Purpose of expenditure	

Date	Payee name	Amount (\$)
	Payee address: City: State: Zip Code	
	Purpose of expenditure	

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