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

FORM COR-C/OH

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #

2 Total pages filed: 7

OFFICE USE ONLY

Date Received

RECEIVED DEC 27 2005 CITY SECRETARY

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Legal

Totals

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

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

NICKNAME LAST: TATRO SUFFIX

4 ORIGINAL REPORT TYPE

- [X] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED

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

6 EXPLANATION OF CORRECTION CORRECTION TO 2 EXPENDITURES REPORTED

1) PAGE 3 OF 8 - SCHEDULE F - EXPENDITURE FOR $718.07 IS DELETED BECAUSE IT WAS PREVIOUSLY REPORTED ON SCHEDULE G
   1) 30 DAY BEFORE ELECTION - 7/1/2003 TO 9/25/2003 - $432.74
   2) 8TH DAY BEFORE ELECTION - 10/26/2003 TO 11/27/2003 - 286.33
   $718.07

2) PAGE 5 OF 8 - SCHEDULE F - EXPENDITURE FOR $224.35 IS REMOVED AND REPORTED INSTEAD ON SCHEDUE G
   THIS EXPENSE SHOULD BE REPORTED ON SCHEDULE G

3) REVISED COVER SHEET PG 2 TO REFLECT DECREASE IN EXPENDITURE TOTAL

7 AFFIDAVIT

LAURA A. HASKINS
NOTARY PUBLIC
STATE OF TEXAS
My Commission Expires
MARCH 14, 2006

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

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 25 day of December 20 05, to certify which, witness my hand and seal of office.

Signature of officer administering oath: Laura A. Haskins

Printed name of officer administering oath: LAURA A. HASKINS

Title of officer administering oath: NOTARY PUBLIC

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

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:

OFFICE USE ONLY

Date Received

RECEIVED DEC 27 2005 CITY SECRETARY

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; APT / SUITE #; CITY; STATE; ZIP CODE	1311 ANTOINE #242 HOUSTON, TX 77055
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE; PHONE NUMBER; EXTENSION	(713) 688-1234
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); APT / SUITE #; CITY; STATE; ZIP CODE	1311 ANTOINE # 242 HOUSTON TX 77055
8 CAMPAIGN TREASURER PHONE	AREA CODE; PHONE NUMBER; EXTENSION	(713) 688-1234

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: / /

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

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

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**	$ 41,380.86
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 Commission Expires
MARCH 14, 2006

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said BRUCE TATRO, this the 25 day of December, 20 05, to certify which, witness my hand and seal of office.

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

Printed on recycled paper

Revised 11/05/2003

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 1

2 FILER NAME: BRUCE K. TATRO

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
12/11/03	ALLSTATE INSURANCE [redacted]	AUTO INSURANCE FOR TRUCK USED FOR CAMPAIGN	224.35	☒
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐

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 3/8

2 FILER NAME: BRUCE TATRO

3 ACCOUNT # (Ethics Commission filers):

COPY OF ORIGINAL

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.): Pitore BANK

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

COPY OF ORIGINAL

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: 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: 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: 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

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: BRUCE 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

COPY OF ORIGINAL

- [ ] 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**	$ ~~41,380.86~~ ~~42,098.93~~
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 Commission Expires
MARCH 14, 2006

AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said BRUCE TATRO, this the 16th day of JANUARY, 2004, to certify which, witness my hand and seal of office.

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

Revised 11/05/2003

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