

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:
3 CANDIDATE / OFFICEHOLDER NAME	TITLE	FIRST	MI
	NICKNAME	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE
5 CAMPAIGN TREASURER NAME	TITLE	FIRST	MI
	NICKNAME	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER EXTENSION
8 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)	
9 PERIOD COVERED		Month Day Year	THROUGH Month Day Year
10 ELECTION		ELECTION DATE	ELECTION TYPE
11 OFFICE		OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages		** 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	

OFFICE USE ONLY

Date Received: 

Date Hand-delivered or Date Postmarked: \_\_\_\_\_

Receipt # \_\_\_\_\_ Amount \_\_\_\_\_

Date Processed \_\_\_\_\_

Date Imaged \_\_\_\_\_

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

**14 C/OH NAME** Bruce Tatro **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. \*\*

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		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.)

<b>18 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)	\$ 14,278.34
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 35,045.77
<b>OUTSTANDING LOAN TOTALS</b>	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.



Bruce Tatro  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bruce Tatro, this the 15<sup>th</sup> day of January, 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 officer administering oath

**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: 5
FILER NAME: Bruce Tatro	ACCOUNT # (Ethics Commission filers)

Date 10-28-200	Full name of contributor <input type="checkbox"/> out of state PAC Associated Builders & Contractors of Greater Houston/ PAC	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77098		
Principal occupation (Optional)		Employer (Optional)	

Date 10-28-200	Full name of contributor <input type="checkbox"/> out of state PAC Waste Management PAC	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024		
Principal occupation (Optional)		Employer (Optional)	

Date 10-28-200	Full name of contributor <input type="checkbox"/> out of state PAC Delwin Cobb	Amount of contribution (\$) \$25.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77080		
Principal occupation (Optional)		Employer (Optional)	

Date 10-28-200	Full name of contributor <input type="checkbox"/> out of state PAC Phillip Abbott	Amount of contribution (\$) \$1,267.50	In-kind contribution description (if available) Mailing services
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77092-4444		
Principal occupation (Optional)		Employer (Optional)	

Date 10-29-200	Full name of contributor <input type="checkbox"/> out of state PAC West Gulf Maritime Association PAC-State	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77029		
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: 5
FILER NAME: Bruce Tatro	ACCOUNT # (Ethics Commission filers)

Date 10-29-200	Full name of contributor <input type="checkbox"/> out of state PAC C.M. Garver	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023		
Principal occupation (Optional)		Employer (Optional)	

Date 10-29-200	Full name of contributor <input type="checkbox"/> out of state PAC Uptown Houston PAC	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77056		
Principal occupation (Optional)		Employer (Optional)	

Date 10-30-200	Full name of contributor <input type="checkbox"/> out of state PAC Donald Dargen	Amount of contribution (\$) \$20.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77043		
Principal occupation (Optional)		Employer (Optional)	

Date 10-30-200	Full name of contributor <input type="checkbox"/> out of state PAC Ronald G. Brookfield	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77090		
Principal occupation (Optional)		Employer (Optional)	

Date 10-31-200	Full name of contributor <input type="checkbox"/> out of state PAC Paul A. Barela	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77077		
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.	Total pages this Schedule A1: 5
FILER NAME: Bruce Tatro	ACCOUNT # (Ethics Commission filers)

Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC Leonita Wilson	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77008-3233		
Principal occupation (Optional)		Employer (Optional)	

Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC William Mellin	Amount of contribution (\$) \$35.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77080		
Principal occupation (Optional)		Employer (Optional)	

Date 11-1-2001	Full name of contributor <input type="checkbox"/> out of state PAC Colleen Raye O'Brien	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77040		
Principal occupation (Optional)		Employer (Optional)	

Date 11-1-2001	Full name of contributor <input type="checkbox"/> out of state PAC H. Steve Bluestein	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77095		
Principal occupation (Optional)		Employer (Optional)	

Date 11-4-2001	Full name of contributor <input type="checkbox"/> out of state PAC Phillip Abbott	Amount of contribution (\$) \$3,180.84	In-kind contribution description (if available) Mailing services
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77092-4444		
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: 5
FILER NAME: Bruce Tatro	ACCOUNT # (Ethics Commission filers)

Date 11-5-2001	Full name of contributor <input type="checkbox"/> out of state PAC Walt Sass	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77084		
Principal occupation (Optional)		Employer (Optional)	

Date 11-5-2001	Full name of contributor <input type="checkbox"/> out of state PAC Jim Jard	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston TX 77024		
Principal occupation (Optional)		Employer (Optional)	

Date 11-6-2001	Full name of contributor <input type="checkbox"/> out of state PAC Houston Fire Fighters PAC Fund	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77009		
Principal occupation (Optional)		Employer (Optional)	

Date 11-7-2001	Full name of contributor <input type="checkbox"/> out of state PAC Jim Ward	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Spring, TX 77383		
Principal occupation (Optional)		Employer (Optional)	

Date 11-12-2001	Full name of contributor <input type="checkbox"/> out of state PAC Jeff Shadwick	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77027		
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: 5
FILER NAME: Bruce Tatro	ACCOUNT # (Ethics Commission filers)

Date 11-13-200	Full name of contributor <input type="checkbox"/> out of state PAC Henry J.N. Taub	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024		
Principal occupation (Optional)		Employer (Optional)	

Date 12-12-200	Full name of contributor <input type="checkbox"/> out of state PAC Ali Davari	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77297		
Principal occupation (Optional)		Employer (Optional)	

Date 12-16-200	Full name of contributor <input type="checkbox"/> out of state PAC Salvatore Mancuso	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77079		
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date	Payee name      Payee address	Amount (\$)
10/28/01	Abbott's Computerized mailing Service 7070 W. 43rd, # 101 Houston TX 77092	\$422.50
Purpose of expenditure (See instructions regarding type of information required.) Mailing services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
10/30/01	U.S. Postmaster 401 Franklin Houston TX 77002	\$3,371.39
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	Amount (\$)
10/30/01	U.S. Postmaster 401 Franklin Houston TX 77002	\$1,186.00
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	Amount (\$)
10/31/01	Brenda Flores 2041 Marnel Houston TX 77055	\$200.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV-Campaign services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
11/1/01	Kight Printing 5750 Bintliff, Suite 202 Houston TX 77036	\$15,073.19
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date 11/4/01	Payee name Abbott's Computerized Mailing Service 7070 W. 43rd, # 101 Houston TX 77092	Payee address Amount (\$) \$1,060.28
Purpose of expenditure (See instructions regarding type of information required.) Mailing services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 11/5/01	Payee name Brenda Flores 2041 Marnel Houston TX 77055	Payee address Amount (\$) \$100.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV-Campaign services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 11/5/01	Payee name Southwestern Bell P.O. Box 3025 Houston TX 77097	Payee address Amount (\$) \$114.30
Purpose of expenditure (See instructions regarding type of information required.) District office phone		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 11/5/01	Payee name Tony Azidhak 7929 Long Point Houston TX 77055	Payee address Amount (\$) \$50.00
Purpose of expenditure (See instructions regarding type of information required.) Yard sign distribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 11/7/01	Payee name Cafe Adobe 7620 Katy Freeway Houston TX 77024	Payee address Amount (\$) \$604.45
Purpose of expenditure (See instructions regarding type of information required.) Event expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission files)
Date	Payee name      Payee address	Amount (\$)
11/8/01	Earl LeBlanc 9023 Springview Houston TX 77080	\$604.62
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for mileage and supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
11/8/01	U.S. Postmaster 401 Franklin Houston TX 77002	\$102.00
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	Amount (\$)
11/14/01	Memorial West Republican Women 13419 Barryknoll Houston, Texas 77079	\$35.00
Purpose of expenditure (See instructions regarding type of information required.) Event ticket		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
11/18/01	Kight Printing 5750 Bintliff, Suite 202 Houston TX 77036	\$5,270.31
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
11/18/01	Kim Jessup 14027 Memorial Dr., Suite 338 Houston, TX 77079	\$4,098.60
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee and reimbursement for expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date	Payee name      Payee address	Amount (\$)
11/29/01	Cingular Wireless P.O Box 711903 Houston TX 77274	\$100.00
Purpose of expenditure (See instructions regarding type of information required.) Cell phone expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
11/29/01	First World Communications (Hypercon) Dept. 244, Denver Colorado 80271-0244	\$49.90
Purpose of expenditure (See instructions regarding type of information required.) Webpage expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
12/3/01	Earl LeBlanc PO BOX 1562 Houston 77251	\$47.27
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for mileage		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
12/3/01	Earl LeBlanc 9023 Springview Houston TX 77080	\$70.35
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for cell phone expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name      Payee address	Amount (\$)
12/7/01	Southwestern Bell P.O. Box 3025 Houston TX 77097	\$119.08
Purpose of expenditure (See instructions regarding type of information required.) District office phone		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date 12/10/01	Payee name Houston Livestock Show and Rodeo PO BOX 20070 Houston Texas 77225	Payee address Amount (\$) \$58.00
Purpose of expenditure (See instructions regarding type of information required.) Advertisement		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date 12/11/01	Payee name Central Houston Pachyderms P.O. Box 31 Houston, TX 77001	Payee address Amount (\$) \$40.00
Purpose of expenditure (See instructions regarding type of information required.) Membership dues		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date 12/11/01	Payee name Ella Schubert 11250 Briar Forest, # 106 Houston TX 77042	Payee address Amount (\$) \$250.00
Purpose of expenditure (See instructions regarding type of information required.) Preparation of reports		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date 12/11/01	Payee name Southwestern Bell P.O. Box 3025 Houston TX 77097	Payee address Amount (\$) \$347.58
Purpose of expenditure (See instructions regarding type of information required.) Campaign phone expense		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date 12/14/01	Payee name Rachel Spencer PO BOX 1562 Houston, Texas 77251	Payee address Amount (\$) \$100.00
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for christmas hams		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date 12/15/01	Payee name Best Buy 9670 Old Katy Road Houston TX 77055	Payee address Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 12/15/01	Payee name Best Buy 9670 Old Katy Road Houston TX 77055	Payee address Amount (\$) \$40.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 12/15/01	Payee name Dillards 4925 Westheimer Houston TX 77056	Payee address Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 12/15/01	Payee name Foleys 920 Strey Lane Houston, Tx 77024	Payee address Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
Date 12/15/01	Payee name Macy's 2727 Sage Road Houston TX 77056	Payee address Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 7
FILER NAME: Bruce Tatro		ACCOUNT #: (Ethics Commission filers)
Date	Payee name Payee address	Amount (\$)
12/15/01	Target 4323 San Felipe Houston TX 77027	\$150.00
Purpose of expenditure (See instructions regarding type of information required.) Staff gift certificate		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name Payee address	Amount (\$)
12/19/01	Paradise Bakery Two Shell Plaza #5038 Houston, TX 77002	\$30.44
Purpose of expenditure (See instructions regarding type of information required.) Refreshments		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name Payee address	Amount (\$)
12/21/01	Earl LeBlanc PO BOX 1562 Houston, Texas 77251	\$85.42
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for mileage		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name Payee address	Amount (\$)
12/21/01	St. Jeromes 8825 Kempwood Houston, Texas	\$120.00
Purpose of expenditure (See instructions regarding type of information required.) Event tickets		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
Date	Payee name Payee address	Amount (\$)
12/31/01	Cingular Wireless P.O Box 711903 Houston TX 77274	\$150.00
Purpose of expenditure (See instructions regarding type of information required.) Cell phone expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE G

The Instruction Guide explains how to complete this form.	Total pages Schedule G: 3
FILER NAME: Bruce Tatro	ACCOUNT #: (Ethics Commission filers)

Date 11/4/01	Payee name Barnaby's Cafe 1701 Shepherd Houston TX 77019	Payee address	Amount (\$) \$33.61 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Dinner expense			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

Date 11/8/01	Payee name Puma Restaurant 8520 Hammerly Houston TX 77055	Payee address	Amount (\$) \$66.33 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

Date 11/19/01	Payee name Ottos' B-B-Que 5502 Memorial Houston TX 77007	Payee address	Amount (\$) \$11.99 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

Date 11/26/01	Payee name Kim Son 2001 Jefferson Houston TX 77003	Payee address	Amount (\$) \$17.50 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

Date 11/29/01	Payee name Antone's 807 Taft Houston TX 77019	Payee address	Amount (\$) \$13.14 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held

# POLITICAL EXPENDITURES

# SCHEDULE G

The Instruction Guide explains how to complete this form.	Total pages Schedule G: 3
FILER NAME: Bruce Tatro	ACCOUNT #: (Ethics Commission filers)

Date 11/29/01	Payee name Regency Parking Garage 611 Clay Houston TX 77002	Payee address	Amount (\$) \$10.50 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Parking expense		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

Date 11/29/01	Payee name Starbucks 2029 West Gray Houston TX 77019	Payee address	Amount (\$) \$9.42 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Meeting expense		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

Date 12/2/01	Payee name Chili's 10510 Northwest Freeway Houston TX 77092	Payee address	Amount (\$) \$18.85 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

Date 12/6/01	Payee name Harris County Toll Road 650 W. Sam Houston Parkwy Houston TX 77042	Payee address	Amount (\$) \$1.00 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Toll		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

Date 12/8/01	Payee name Harris County Toll Road 651 W. Sam Houston Parkwy Houston TX 77042	Payee address	Amount (\$) \$2.00 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Toll		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

# POLITICAL EXPENDITURES

# SCHEDULE G

The Instruction Guide explains how to complete this form.	Total pages Schedule G: 3
FILER NAME: Bruce Tatro	ACCOUNT #: (Ethics Commission filers)

Date 12/21/01	Payee name Kim Son 2001 Jefferson Houston TX 77003	Payee address	Amount (\$) \$66.78 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Lunch expense		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	

Date 12/24/01	Payee name Specs 963 Bunker Hill Houston TX 77024	Payee address	Amount (\$) \$143.97 (X) Reimbursement from political contributions intended
Purpose of expenditure (See instructions regarding type of information required.) Gifts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held	