



**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****14 C/OH NAME** Spelman, William**15 ACCOUNT #** (Ethics Commission filers)  
00121212**16 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****COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION  
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

846.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

11,321.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

21.00

4. TOTAL POLITICAL EXPENDITURES

\$

1,393.59

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

10,326.77

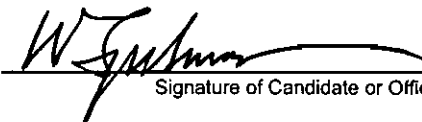
**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

0.00

**18 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.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said William Glenn Spelman, this the 15 day  
of January, 20 09, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Reyna Ruiz

Print name of officer administering oath

Admin Specialist

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/8 Report: 3/12	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  12/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alfaro, Nieves  6 Contributor address; City; State; Zip Code 10700 Lovridge Drive Austin, TX 78739	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, David  Contributor address; City; State; Zip Code 1515 Oxford Ave. Austin, TX 78704	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Black & Veatch	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayres, Robert & Margaret  Contributor address; City; State; Zip Code 2408 Keating Lane Austin, TX 78703	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Managing Partner / homemaker		Employer (See Instructions) Shield Ranch / none	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Champion, Mario  Contributor address; City; State; Zip Code 1406a Cinnamon Path Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cortez, John-Michael  Contributor address; City; State; Zip Code 1601 Miriam #303 Austin, TX 78702	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Community Involvement		Employer (See Instructions) CAPMetro	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/8 Report: 4/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  
  
12/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Craig

6 Contributor address; City; State; Zip Code  
3411 Hillview Rd.  
Austin, TX 78703

7 Amount of  
contribution (\$) \$200.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Lawyer

10 Employer (See Instructions)  
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Davis, Katherine

12/30/2008

Contributor address; City; State; Zip Code  
3411 Hillview Rd  
Austin, TX 78703

Amount of  
contribution (\$) \$300.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
homemaker

Employer (See Instructions)  
none

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
DeLuna, Eva

12/19/2008

Contributor address; City; State; Zip Code  
8508 Spearman Dr.  
Austin, TX 78757

Amount of  
contribution (\$) \$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Analyst

Employer (See Instructions)  
Center for Public Policy Priorities

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dobbs, David

12/27/2008

Contributor address; City; State; Zip Code  
9702 Swansons Ranch Rd.  
Austin, TX 78748

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Espey, William

12/29/2008

Contributor address; City; State; Zip Code  
3809 South Second Street, Suite B-300  
Austin, TX 78704

Amount of  
contribution (\$) \$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Espey Consultants, Inc.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/8 Report: 5/12	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  12/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferchill, Cary  6 Contributor address; City; State; Zip Code 2524 Tanglewood Trail Austin, TX 78703	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fisher, Francis  Contributor address; City; State; Zip Code 3208 Harris Park Ave. Austin, TX 78705	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frede, Martha  Contributor address; City; State; Zip Code 1000 Liberty Park Drive #106 Austin, TX 78746	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gecic, Filip  Contributor address; City; State; Zip Code 3816 S. Lamar Blvd. Apt. 3603 Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gray, Dale  Contributor address; City; State; Zip Code 4700 N. Capital of Texas Hwy. #532 Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Espey Consultants	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/8 Report: 6/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

12/30/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gregory, Bob

6 Contributor address; City; State; Zip Code  
2939 Westlake Cove  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President & CEO

10 Employer (See Instructions)  
Texas Disposal Systems, Inc.

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hess, Myron

Contributor address; City; State; Zip Code  
1705 Margaret  
Austin, TX 78704

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
National Wildlife Federation

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holderness, Earl

Contributor address; City; State; Zip Code  
2943 Thousand Oaks  
Austin, TX 78746

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Houston, Daniel

Contributor address; City; State; Zip Code  
4302 Avenue D.  
Austin, TX 78751

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Civic Economics

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kitchen, Ann

Contributor address; City; State; Zip Code  
2401 Briargrove Drive  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/8 Report: 7/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  
  
12/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Koegler, Kurt

6 Contributor address; City; State; Zip Code  
1701 Bauerle Ave  
Austin, TX 78704-3303

7 Amount of  
contribution (\$) \$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Business Exec

10 Employer (See Instructions)  
Stubbs Legendary Kitchen

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kozmetsky, Cynthia

12/30/2008

Contributor address; City; State; Zip Code  
4802 Ridge Oak Drive  
Austin, TX 78731

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
KMS Ventures

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lewis, Fred

12/30/2008

Contributor address; City; State; Zip Code  
4509 Edgemont Dr.  
Austin, TX 78731

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Campaigns for People

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lipscombe, John

12/31/2008

Contributor address; City; State; Zip Code  
6600 Mesa Dr.  
Austin, TX 78731

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Perry & Sheridan

12/29/2008

Contributor address; City; State; Zip Code  
1311 A East 6th Street  
Austin, TX 78702

Amount of  
contribution (\$) \$700.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
real-estate / hospitality executive

Employer (See Instructions)  
self / Mitchell Family Properties

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/8 Report: 8/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date 12/30/2008 5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Medina, Arnoldo

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

\$175.00

(If travel outside of Texas, complete Schedule T) ☐

6 Contributor address; City; State; Zip Code  
2902 Ashwood St.  
Houston, TX 77025

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 12/18/2008 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moffat, Susan

Amount of contribution (\$) In-kind contribution description (if applicable)

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
researcher/writer

Employer (See Instructions)  
self

Date 12/30/2008 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moody, Keith & Monique

Amount of contribution (\$) In-kind contribution description (if applicable)

\$700.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Engineer / homemaker

Employer (See Instructions)  
Espey Consultants, Inc. / none

Date 12/31/2008 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Morrison, Susan

Amount of contribution (\$) In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 12/31/2008 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Musselman, Karl-Thomas

Amount of contribution (\$) In-kind contribution description (if applicable)  
web design & consulting

\$300.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 9/12	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  12/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neavel, Dick  6 Contributor address; City; State; Zip Code 2905 Scenic Dr. Austin, TX 78703	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions) retired	
Date  12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patel, Snehal  Contributor address; City; State; Zip Code 2902 Ashwood St. Houston, TX 77025	Amount of contribution (\$)  \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reis, Brian & Valerie  Contributor address; City; State; Zip Code 6516 Rotan Dr. Austin, TX 78749	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President / CFO		Employer (See Instructions) Espey Consultants, Inc. / Espey Consultants, Inc.	
Date  12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, G.J.  Contributor address; City; State; Zip Code 3411 Hillview Austin, TX 78703	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date  12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shea, Brigid  Contributor address; City; State; Zip Code 2604 Geraghty Ave. Austin, TX 78757	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President (consultant)		Employer (See Instructions) Brigid Shea & Associates	



**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 1/1 Report: 11/12**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date**5** Payee name

Checkmark Typesetting

**7** Amount  
(\$)

12/19/2008

**6** Payee address; City; State; Zip Code3217 N. IH 35  
Austin, TX 78722

\$65.30

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

graphic design

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

Payee name

Paypal

Amount  
(\$)

12/31/2008

Payee address; City; State; Zip Code

P.O. Box 7022  
Mountain View, TX 94039

\$200.11

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

credit card processing fees

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

Payee name

Worley Printing

Amount  
(\$)

12/19/2008

Payee address; City; State; Zip Code

3217 N. IH 35  
Austin, TX 78722

\$628.93

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

printing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 1/1 Report: 12/12

**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date

12/31/2008

**5** Payee name  
Threadgill's**6** Payee address; City; State; Zip Code  
301 W. Riverside Dr.  
Austin, TX 78704**7** Purpose of expenditure (See instructions regarding type of information required.)  
event expense(If travel outside of Texas, complete Schedule T) ☐**8** Amount  
(\$)

\$449.25

☒ Reimbursement  
from political  
contributions  
intended

Date

12/29/2008

Payee name  
USPSPayee address; City; State; Zip Code  
Downtown Station  
Austin, TX 78701Purpose of expenditure (See instructions regarding type of information required.)  
postage(If travel outside of Texas, complete Schedule T) ☐Amount  
(\$)

\$29.00

☒ Reimbursement  
from political  
contributions  
intended

**SCHEDULE W** (part 1 of 2) - *attach to form C/OH and form SPAC*  
**ANNUAL RECONCILIATION**

Reference 2-2-25, Austin City Code

For each checking, savings or other financial institution account maintained during 2008, enter the following information indicated. For each additional institution, use a copy of this schedule.

(1) The name of the financial institution and type of account:

UFCU – Checking & Savings

(2) A listing of date, payee and amount of checks issued on that account that have not cleared by December 31:

Date: 12-19-08

Payee: Worley Printing

Amount: \$628.93

Date: 12-19-08

Payee: Checkmark Typesetting

Amount: \$65.30

Date: 12-31-08

Payee: Paypal

Amount: \$200.11

Attach additional pages, if necessary.

[3] A listing of checks received as contributions and deposited, but dishonored by the contributor's financial institution:

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Attach additional pages, if necessary.

**SCHEDULE W** (Part 2 of 2) - *attach to form C/OH and form SPAC*

**ANNUAL RECONCILIATION**

Reference 2-2-25, Austin City Code

(4) All interest or dividends earned:

0

(5) All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

0

Attach additional pages, if necessary.

(6) The beginning balance for

2008: 0

(7) The ending balance for

2008: \$11,021

**SCHEDULE V – attach to form C/OH**  
**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**  
Reference 2-2-14, Austin City Code

Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

Name of person soliciting  
contributions: Brian Reis

Address: 3809 South 2nd St., Ste. B-300, Austin, TX, 78704

FORM **COR-C/OH**

# **CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER**

<b>1</b> ACCOUNT # 00121212		<b>2</b> Total pages filed: 16		<b>OFFICE USE ONLY</b>	
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received	
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Postmarked	
<b>4</b> ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Amount	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Processed	
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Date Imaged	
<b>5</b> ORIGINAL PERIOD COVERED	Month 11	Day 10	Year 2008	THROUGH	Month 12
					Day 31
					Year 2008

**6 EXPLANATION OF CORRECTION**

This amended report contains the following corrections:

1. Correction of name-G.J. Robinson to Garland John Robinson.
2. Detailed description of the following expenditures:
  - a) Paypal
  - b) Worley Printing
  - c) Threadgill's Restaurant

**7 AFFIDAVIT**

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

Check ONLY if applicable:



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.

*W. Spelman*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by *William Spelman*

this the *18<sup>th</sup>* day of *January*.

20<sup>11</sup> to certify which, witness my hand and seal of office

*Candy Hinkle*

Signature of officer administering oath

*Candy Hinkle*

Printed name of officer administering oath

*Notary Public*

Title of officer administering oath

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

# 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)  
00121212

**2 PAGE #**  
1 of 12

**3 CANDIDATE /  
OFFICEHOLDER  
NAME**

MS / MRS / MR

FIRST

MI

William

NICKNAME

LAST

SUFFIX

Bill

Spelman

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

 PO Box 13534  
Austin, TX 78711

☐ Change of Address

**5 CAMPAIGN  
TREASURER  
NAME**

MS / MRS / MR

FIRST

MI

David

NICKNAME

LAST

SUFFIX

Dave

Anderson

**6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)**

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

 1515 Oxford Ave.  
Austin, TX 78704

**7 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 924-2393

**8 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)

**9 PERIOD  
COVERED**

Month

Day

Year

THROUGH

Month

Day

Year

11/10/2008

12/31/2008

**10 ELECTION**

ELECTION DATE

Month

Day

Year

ELECTION TYPE

05/09/2009

☐ Primary☐ Runoff☒ General☐ Special
**11 OFFICE**

OFFICE HELD (if any)

**12 OFFICE SOUGHT (if known)**  
City Council Place 5

**13 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**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****14 C/OH NAME** *Spelman, William***15 ACCOUNT #** (Ethics Commission filers)  
00121212**16 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****COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION  
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 846.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 11,321.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 21.00

4. TOTAL POLITICAL EXPENDITURES

\$ 1,393.59

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 10,326.77

**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

**18 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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said William Glenn Spelman, this the 15 day  
of January, 2009, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Reyna Ruiz

Print name of officer administering oath

Admin Specialist

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/8 Report: 3/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

12/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Alfaro, Nieves

6 Contributor address; City; State; Zip Code  
10700 Lovridge Drive  
Austin, TX 78739

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Anderson, David

Contributor address; City; State; Zip Code  
1515 Oxford Ave.  
Austin, TX 78704

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Engineer

Employer (See Instructions)  
Black & Veatch

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ayres, Robert & Margaret

Contributor address; City; State; Zip Code  
2408 Keating Lane  
Austin, TX 78703

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Managing Partner / homemaker

Employer (See Instructions)  
Shield Ranch / none

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Champion, Mario

Contributor address; City; State; Zip Code  
1408a Cinnamon Path  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cortez, John-Michael

Contributor address; City; State; Zip Code  
1601 Miriam #303  
Austin, TX 78702

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Community Involvement

Employer (See Instructions)  
CAPMetro

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8 Report: 4/12	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  12/31/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Craig  6 Contributor address; City; State; Zip Code 3411 Hillview Rd. Austin, TX 78703	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Lawyer		10 Employer (See Instructions) Self	
Date  12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Katherine  Contributor address; City; State; Zip Code 3411 Hillview Rd. Austin, TX 78703	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
Date  12/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeLuna, Eva  Contributor address; City; State; Zip Code 8508 Spearman Dr. Austin, TX 78757	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Center for Public Policy Priorities	
Date  12/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dobbs, David  Contributor address; City; State; Zip Code 9702 Swansons Ranch Rd. Austin, TX 78748	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Espey, William  Contributor address; City; State; Zip Code 3809 South Second Street, Suite B-300 Austin, TX 78704	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Espey Consultants, Inc.	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/8 Report: 5/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

12/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ferchill, Cary

6 Contributor address; City; State; Zip Code  
2524 Tanglewood Trail  
Austin, TX 78703

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fisher, Francis

Contributor address; City; State; Zip Code  
3208 Harris Park Ave.  
Austin, TX 78705

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Frede, Martha

Contributor address; City; State; Zip Code  
1000 Liberty Park Drive #106  
Austin, TX 78746

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gecic, Filip

Contributor address; City; State; Zip Code  
3816 S. Lamar Blvd. Apt. 3603  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gray, Dale

Contributor address; City; State; Zip Code  
4700 N. Capital of Texas Hwy. #532  
Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Engineer

Employer (See Instructions)  
Espey Consultants

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 4/8 Report: 6/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

12/30/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gregory, Bob

6 Contributor address; City; State; Zip Code  
2939 Westlake Cove  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
President & CEO

10 Employer (See Instructions)  
Texas Disposal Systems, Inc.

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hess, Myron

Contributor address; City; State; Zip Code  
1705 Margaret  
Austin, TX 78704

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
National Wildlife Federation

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Holderness, Earl

Contributor address; City; State; Zip Code  
2943 Thousand Oaks  
Austin, TX 78746

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/21/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Houston, Daniel

Contributor address; City; State; Zip Code  
4302 Avenue D,  
Austin, TX 78751

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Civic Economics

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kitchen, Ann

Contributor address; City; State; Zip Code  
2401 Briargrove Drive  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/8 Report: 7/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

12/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Koegler, Kurt

6 Contributor address; City; State; Zip Code  
1701 Bauerle Ave  
Austin, TX 78704-3303

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Business Exec

10 Employer (See Instructions)  
Stubbs Legendary Kitchen

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kozmetsky, Cynthia

Contributor address; City; State; Zip Code  
4802 Ridge Oak Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
KMS Ventures

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lewis, Fred

Contributor address; City; State; Zip Code  
4509 Edgemont Dr.  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Campaigns for People

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lipscombe, John

Contributor address; City; State; Zip Code  
6600 Mesa Dr.  
Austin, TX 78731

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/29/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lorenz, Perry & Sheridan

Contributor address; City; State; Zip Code  
1311 A East 6th Street  
Austin, TX 78702

Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
real-estate / hospitality executive

Employer (See Instructions)  
self / Mitchell Family Properties

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/8 Report: 8/12

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

12/30/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Medina, Arnoldo6 Contributor address; City; State; Zip Code  
2902 Ashwood St.  
Houston, TX 770257 Amount of  
contribution (\$)

\$175.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/18/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moffat, SusanContributor address; City; State; Zip Code  
4112 Speedway  
Austin, TX 78751Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
researcher/writerEmployer (See Instructions)  
self

Date

12/30/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moody, Keith & MoniqueContributor address; City; State; Zip Code  
3215 Nancy Gale Dr.  
Austin, TX 78735Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Engineer / homemakerEmployer (See Instructions)  
Espey Consultants, Inc. / none

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Morrison, SusanContributor address; City; State; Zip Code  
4205 Ramsey Ave.  
Austin, TX 78756Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Musselman, Karl-ThomasContributor address; City; State; Zip Code  
1512A Pennsylvania  
Austin, TX 78702Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)  
web design & consulting(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Schedule 7/8 Report 9/12	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission Filers) 00121212	
4 Date 12/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neavel, Dick	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2905 Scenic Dr. Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions) retired	
Date 12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Snehal	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2902 Ashwood St. Houston, TX 77025		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reis, Brian & Valerie	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6516 Rotan Dr. Austin, TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Vice President/CFO		Employer (See Instructions) Espey Consultants, Inc./Espey Consultants, Inc.	
Date 12/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Garland John	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3411 Hillview Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 12/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Brigid	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2604 Geraghty Ave. Austin, TX 78757		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President (Consultant)		Employer (See Instructions) Brigid Shea & Associates	

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

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

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**

Schedule: 8/8 Report: 10/12

**2 FILER NAME** Spelman, William

**3 ACCOUNT #** (Ethics Commission filers)  
00121212

**4 Date**

12/31/2008

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sheffield, Mike

**6 Contributor address; City; State; Zip Code**  
300 W. Sequoia Spur  
Georgetown, TX 78628

**7 Amount of contribution (\$)**

\$200.00

**8 In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**9 Principal occupation / Job title (See Instructions)**  
Staff Representative

**10 Employer (See Instructions)**  
Combined Law Enforcement Associations of Texas

**Date**

12/31/2008

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Spelman, Janice

**Contributor address; City; State; Zip Code**  
3926 Canyon Glen Circle  
Austin, TX 78732

**Amount of contribution (\$)**

\$350.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Senior District Operations Manager

**Employer (See Instructions)**  
Capital One Bank

**Date**

12/22/2008

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wameke, Bob

**Contributor address; City; State; Zip Code**  
P.O. Box 2388  
Austin, TX 78768

**Amount of contribution (\$)**

\$100.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date**

12/31/2008

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Warshaw, Larry & Meredith Palge

**Contributor address; City; State; Zip Code**  
1000 E. 8th  
Austin, TX 78702

**Amount of contribution (\$)**

\$700.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
real estate / homemaker

**Employer (See Instructions)**  
Contractive Ventures / none

**Date**

12/31/2008

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Way, Heather

**Contributor address; City; State; Zip Code**  
2108 Wright St.  
Austin, TX 78704

**Amount of contribution (\$)**

\$75.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# POLITICAL EXPENDITURES

## SCHEDULE F

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule F: Schedule: 1/1 Report: 11/12	
<b>2</b> FILER NAME      Spelman, William		<b>3</b> ACCOUNT # (Ethics Commission filers) 00121212	
<b>4</b> Date  12/19/2008	<b>5</b> Payee name Checkmark Typesetting  <b>6</b> Payee address;      City; State; Zip Code 3217 N IH 35 Austin, TX 78722	<b>7</b> Amount (\$)  \$65.30	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Advertising expense-graphic design  (If travel outside of Texas, complete Schedule T)		<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date  12/31/2008	Payee name Paypal  Payee address;      City; State; Zip Code P.O. Box 7022 Mountain View, TX 94039	Amount (\$)  \$200.11	
Purpose of payment (See instructions regarding type of information required.) Credit card processing fees for online donations (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date  12/19/2008	Payee name Worley Printing  Payee address;      City; State; Zip Code 3217 N IH 35 Austin, TX 78722	Amount (\$)  \$628.93	
Purpose of payment (See instructions regarding type of information required.) Printing expense-campaign materials  (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
Date	Payee name   Payee address;      City; State; Zip Code	Amount (\$)  	
Purpose of payment (See instructions regarding type of information required.)   (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>			

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule G:  
Schedule: 1/1 Report: 12/12

**2** FILER NAME  
Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  12/31/2008	<b>5</b> Payee name Threadgill's ..... <b>6</b> Payee address; City; State; Zip Code 301 W. Riverside Dr. Austin, TX 78704 <b>7</b> Purpose of expenditure (See instructions regarding type of information required.) Event expense- food & meeting space fees (If travel outside of Texas, complete Schedule T)	<b>8</b> Amount (\$)  \$449.25  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  12/29/2008	Payee name USPS ..... Payee address; City; State; Zip Code Downtown Station Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Advertising expense-postage (If travel outside of Texas, complete Schedule T)	Amount (\$)  \$29.00  <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name ..... Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name ..... Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name ..... Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**SCHEDULE W** (part 1 of 2) - *attach to form C/OH and form SPAC*  
**ANNUAL RECONCILIATION**

Reference 2-2-25, Austin City Code

For each checking, savings or other financial institution account maintained during 2008, enter the following information indicated. For each additional institution, use a copy of this schedule.

(1) The name of the financial institution and type of account:

UFCU - Checking & Savings

(2) A listing of date, payee and amount of checks issued on that account that have not cleared by December 31:

Date: 12-19-08

Payee: Worley Printing

Amount: \$628.93

Date: 12-19-08

Payee: Checkmark Typesetting

Amount: \$65.30

Date: 12-31-08

Payee: Paypal

Amount: \$200.11

Attach additional pages, if necessary.

[3] A listing of checks received as contributions and deposited, but dishonored by the contributor's financial institution:

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Contributor: \_\_\_\_\_

Amount: \_\_\_\_\_

Attach additional pages, if necessary.

**SCHEDULE W** (Part 2 of 2) - *attach to form C/OH and form SPAC*  
**ANNUAL RECONCILIATION**

Reference 2-2-25, Austin City Code

(4) All interest or dividends earned:

0

(5) All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

0

Attach additional pages, if necessary.

(6) The beginning balance for

2008: 0

(7) The ending balance for

2008: \$11,021

**SCHEDULE V – attach to form C/OH**  
**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**  
Reference 2-2-14, Austin City Code

Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

Name of person soliciting  
contributions: Brian Reis  
Address: 3809 South 2nd St., Ste. B-300, Austin, TX, 78704

FORM COR-C/OH

# CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT # 00121212		2 Total pages filed: 5		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received 2011 JUL 13 10 PM RECEIVED AUSTIN CITY CLERK		
	NICKNAME	LAST	SUFFIX			
	Bill	Spelman				
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded \$500 limit			
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final report			
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07	01	09	THROUGH	12	31
Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged						

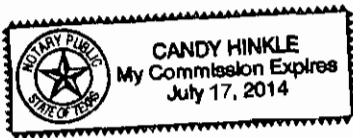
## 6 EXPLANATION OF CORRECTION

1. Update expenditures under \$50
2. Move iContact expenditure (01/01/10 to July 15 2010 Finance Report)
3. Add the following expenditures:
  - a) 7/20/09- Wufoo, b) 8/19/09- Wufoo, c) 9/19/09- Wufoo
  - d) 10/19/09- Wufoo, e) 11/19/09- Wufoo, f) 12/19/09- Wufoo
4. Update maintained balance.

## 7 AFFIDAVIT

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

Check ONLY if applicable:



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.

*W. Spelman*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by

*W. Spelman*

this the 13<sup>th</sup> day of July

20

to certify which witness my hand and seal of office.

*Candy Hinkle*

*Candy Hinkle*

*Notary Public*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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

# 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) 00121212	2 Total pages filed: 1 of 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William NICKNAME LAST SUFFIX Bill Spelman		<b>OFFICE USE ONLY</b>  Date Received   Date Hand-delivered or Postmarked  Receipt # Amount  Date Processed  Date Imaged
	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE 301 W 2nd St Austin, TX 78701 <input checked="" type="checkbox"/> change of address		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 974.2256		
5 CANDIDATE/ OFFICEHOLDER PHONE	MS / MRS / MR FIRST MI David NICKNAME LAST SUFFIX Anderson		
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE; ZIP CODE 1515 Oxford Ave. Austin, TX 78704		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 924.2393		
8 CAMPAIGN TREASURER PHONE	9 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 REPORT TYPE	10 PERIOD COVERED Month Day Year    THROUGH    Month Day Year 07 / 01 / 09    12 / 31 / 09		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05 / 09 / 2009		
12 OFFICE	OFFICE HELD (if any)    13 OFFICE SOUGHT (if known) Council Member, Place 5		
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		
<input type="checkbox"/> additional pages			
<b>GO TO PAGE 2</b>			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****15 C/OH NAME** Spelman, William**16 ACCOUNT # (Ethics Commission Filers)**  
00121212**17 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

\* This box is for notice of political contributions accepted or political expenditures made 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

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 190.28

4. TOTAL POLITICAL EXPENDITURES

\$ 190.28

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 20,413.70

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

**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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath\_\_\_\_\_  
Printed name of officer administering oath\_\_\_\_\_  
Title of officer administering oath

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 1/2 Report: 3/4

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  12/15/2009	<b>5</b> Payee name iContact (12/15/09-12/31/09)  <b>6</b> Payee address; City; State; Zip Code 2635 Meridian Pkwy., Ste. 200 Durham, NC 27713	<b>7</b> Amount (\$)  40.58
---------------------------------	---	--------------------------------------

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Email Services  (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
---	--

Date  07/20/2009	Payee name Wufoo  Payee address; City; State; Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	Amount (\$)  \$24.95
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.) Website Services  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  08/19/2009	Payee name Wufoo  Payee address; City; State; Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	Amount (\$)  \$24.95
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.) Website Services  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  09/19/2009	Payee name Wufoo  Payee address; City; State; Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	Amount (\$)  \$24.95
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.) Website Services  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 2/2 Report: 4/4**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date**5** Payee name

Wufoo

**7** Amount  
(\$)

10/19/2009

**6** Payee address; City; State; Zip Code

16057 Tampa Palms Blvd. West

Tampa, FL 33647

\$24.95

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

Website Services

(If travel outside of Texas, complete Schedule T)

**9** \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Wufoo

Amount  
(\$)

11/19/2009

Payee address; City; State; Zip Code

16057 Tampa Palms Blvd. West

Tampa, FL 33647

\$24.95

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

Website Services

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Wufoo

Amount  
(\$)

12/19/2009

Payee address; City; State; Zip Code

16057 Tampa Palms Blvd.

West

\$24.95

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

Website Services

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

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

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

(If travel outside of Texas, complete Schedule T)

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

FORM **COR-C/OH**

# **CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER**

<b>1 ACCOUNT #</b> 00121212		<b>2 Total pages filed:</b> 60		<b>OFFICE USE ONLY</b>	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST	MI	Date Received	
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Postmarked	
<b>4 ORIGINAL REPORT TYPE</b>	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Amount	
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Processed	
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Date Imaged	
<b>5 ORIGINAL PERIOD COVERED</b>		Month	Day	Year	
01 / 01 / 2009 THROUGH 03 / 30 / 2009					

**6 EXPLANATION OF CORRECTION**

Please see the attached corrections below.

**7 AFFIDAVIT**

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

Check ONLY if applicable:



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.

*William Spelman*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by

*William Spelman*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

this the

*18<sup>th</sup>*  
\_\_\_\_\_  
day of

*January*  
\_\_\_\_\_  
to certify which, witness my hand and seal of office.

20

*Candy Hinkle*  
\_\_\_\_\_  
Signature of officer administering oath

*Candy Hinkle*  
\_\_\_\_\_  
Printed name of officer administering oath

*Notary Public*  
\_\_\_\_\_  
Title of officer administering oath

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

The amended report contains the following corrections:

1. Corrected contributors names:

- a) A/TCEMSE-PAC to Austin/Travis County Emergency Medical Services Employee PAC
- b) AFSCME PAC to American Federation of State, County, and Municipal Employees PAC
- c) JJ Baskin to Jefferson Jones Baskin
- d) BMcPAC to Brown McCarroll PAC
- e) BOMA Austin PAC to Building Owners & Managers Association of Austin PAC
- f) CDM PAC to Camp Dresser McKee PAC
- g) CT Chang to Chi-Tong Chang
- h) LAN-PAC to Lockwood, Andrews, Newman, Inc. PAC
- i) Roma Austin Design to Roma Austin collaborate Design Studio, PLLC

2. Detailed description of expenditures:

- a) Apple Annies
- b) Cuatros
- c) Johnny Degollado
- d) Susan Harry
- e) Kelly Graphics
- f) Kinkos
- g) Karl Thomas Musselman
- h) Nuevo Leon
- i) Office Max
- j) Paypal
- k) Jim Ranes
- l) Scholz
- m) Jeff Smith
- n) Taco Shack
- o) UT Campus Computer Store
- p) Worley Printing Company

3. Remove the following duplicate expenditures: Expenditures can be found in Jan 15 2009 Report (a&b) and 8 Day Report (c),

- a) Checkmark Typesetting (1/16/09)
- b) Worley Printing (1/14/09)
- c) Checkmark Typesetting (3/30/09)

4. Update Total Expenditures from \$39,658.89 to \$33,842.30 (removing the duplicated expenditures).

**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) 00121212		2 Total pages filed:  1 of 58	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William		OFFICE USE ONLY		
	NICKNAME LAST SUFFIX Bill Spelman				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE PO Box 13534 Austin, TX 78711		Date Received		
			Date Hand-delivered or Date Postmarked		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE ( 512 )	PHONE NUMBER 974.2256	EXTENSION	Receipt #	Amount
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI David		Date Processed		
	NICKNAME LAST SUFFIX Dave Anderson		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1515 Oxford Ave. Austin, TX 78704				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 512 )	PHONE NUMBER 924.2393	EXTENSION		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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)				
10 PERIOD COVERED	Month Day Year 01 / 01 / 09		THROUGH	Month Day Year 03 / 30 / 09	
11 ELECTION	ELECTION DATE Month Day Year 05 / 09 / 2009		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
	12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) City Council, Place 5		
14 NOTICE OF 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				

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****15 C/OH NAME** Spelman, William**16 ACCOUNT #** (Ethics Commission Filers)  
00121212**17 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

\* This box is for notice of political contributions accepted or political expenditures made 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 \$ 2,918.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 50,808.78

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 135.59

4. TOTAL POLITICAL EXPENDITURES \$ 33,842.30

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 22,117.23

**OUTSTANDING  
LOAN TOTALS**

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

**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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath\_\_\_\_\_  
Printed name of officer administering oath\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:  
Schedule: 1/39 Report: 3/58

2 FILER NAME

Spelman, William

3 ACCOUNT # (Ethics Commission Filers)

00121212

4 Date

03/02/2009

5 Full name of contributor ☐ out-of-state PAC (ID#:

Austin/Travis County Emergency

Medical Services Employee PAC

6 Contributor address; City; State; Zip Code

A/TCEMSE-PAC

400 W 14th St., Ste 230

Austin, TX 78701

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

03/14/2009

Full name of contributor ☐ out-of-state PAC (ID#:

Adler, Stephen

Contributor address; City; State; Zip Code

3313 Lake Cliff Ct.

Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Barron & Adler

Date

03/12/2009

Full name of contributor ☐ out-of-state PAC (ID#:

American Federation of State, County,  
and Municipal Employees PAC

Contributor address; City; State; Zip Code

1625 L. St. NW

Washington, DC 20036

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/12/2009

Full name of contributor ☐ out-of-state PAC (ID#:

Alfaro III, Nieves

Contributor address; City; State; Zip Code

10700 Lovridge Drive

Austin, TX 78739

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Sr. Project Manager

Employer (See Instructions)  
KBR

Date

03/29/2009

Full name of contributor ☐ out-of-state PAC (ID#:

Alsup, Jim

Contributor address; City; State; Zip Code

2610 St. Anthony

Austin, TX 78703

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 2/39 Report: 4/58

**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)

00121212

**4** Date

02/25/2009

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Amalgamated Transit Union PAC**6** Contributor address; City; State; Zip Code  
5025 Wisconsin Ave. N.W.  
Washington, DC 20016-4139**7** Amount of  
contribution (\$)

\$300.00

**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

01/23/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Andre, SarahContributor address; City; State; Zip Code  
2318 Canterbury St  
Austin, TX 78702Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/07/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Archer, SamContributor address; City; State; Zip Code  
1511A W. 10th Street  
Austin, TX 78703Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Armstrong III, William & ValerieContributor address; City; State; Zip Code  
2704 Maria Anna Rd.  
Austin, TX 78703Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
CEO / homemakerEmployer (See Instructions)  
Stratus Management, LLC / none

Date

02/03/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Arredondo III, AntonioContributor address; City; State; Zip Code  
14500 Blanco Rd.  
Apt. 1332  
San Antonio, TX 78216Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/39 Report: 5/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

02/24/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Arriola, Richard6 Contributor address; City; State; Zip Code  
P.O. Box 152588  
Austin, TX 787157 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

03/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Associated Builders & Contractors PACContributor address; City; State; Zip Code  
Associated Builders & Contractors PAC  
3006 Longhorn Blvd. Ste 104  
Austin, TX 78758Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/10/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Austin Firefighters PACContributor address; City; State; Zip Code  
Austin Firefighters PAC  
7537 Cameron Rd.  
Austin, TX 78752Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Austin Police Association PACContributor address; City; State; Zip Code  
400 W 14th St 230  
Austin, TX 78701Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ayres, PatriciaContributor address; City; State; Zip Code  
5705 Scout Island Cove  
Austin, TX 78731Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Homemaker

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Schedule: 4/39 Report: 6/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission Filers) 00121212	
4 Date 02/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Baer, Therese 6 Contributor address; City; State; Zip Code 5904 Mountainclimb Dr. No. 1 Austin, TX 78731	7 Amount of contribution (\$) \$ 350.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) Baer Engineering	
Date 01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Baird, Charles Contributor address; City; State; Zip Code PO Box 1242 Austin, TX 78767-1242	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Barnes III, Jay Contributor address; City; State; Zip Code 1108 W 7th St. Austin, TX 78703	Amount of contribution (\$) \$ 350.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Barnes Gromatzky Kosarek Architects	
Date 03/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Baskin, Jefferson Jones Contributor address; City; State; Zip Code 1618 Waterson Ave. Austin, TX 78703	Amount of contribution (\$) \$ 77.77 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Baum, Gerald Contributor address; City; State; Zip Code 8608 Tailwood Dr. Austin, TX 78759	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/39 Report: 7/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  01/26/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bayer, Leo  6 Contributor address; City; State; Zip Code 900 S. Lamar Blvd/ #312 Austin, TX 78704	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Software Engineer		10 Employer (See Instructions) Borland	
Date  02/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beall, Roger  Contributor address; City; State; Zip Code 5908 Rickerhill Lane Austin, TX 78739	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Regional Engineer		Employer (See Instructions) Advanced Drainage Systems	
Date  03/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Behrens, Eric  Contributor address; City; State; Zip Code 1816 Kenwood Ave. Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bercu, Steven  Contributor address; City; State; Zip Code 4108 Bumel Rd Austin, TX 78756	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Betts, Charles  Contributor address; City; State; Zip Code 14741 Arrowhead Volente, TX 78641	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Downtown Austin Alliance	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:  
Schedule: 6/39 Report: 8/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission Filers)  
00121212

4 Date  
03/24/2009

5 Full name of contributor ☐ out-of-state PAC (ID#:  
Beuerlein, Steve

6 Contributor address: City: State: Zip Code  
2605 Woodmont Avenue  
Austin, TX 78703

7 Amount of  
contribution (\$) \$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Owner

10 Employer (See Instructions)  
Burlington Ventures, Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID#:  
Blacklock, Shirley & Dan

03/20/2009

Contributor address: City: State: Zip Code  
13005 Shawnee  
Manchaca, TX 78652

Amount of  
contribution (\$) \$700.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Legal Secretary/Retired

Employer (See Instructions)  
Brown McCarroll/Retired

Date

Full name of contributor ☐ out-of-state PAC (ID#:  
Blodgett, Terrell

03/24/2009

Contributor address: City: State: Zip Code  
1801 Lavaca, #13-E  
Austin, TX 78701

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID#:  
Brown McCarroll PAC

03/03/2009

Contributor address: City: State: Zip Code  
111 Congress Ave  
Austin, TX 78701-4043

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#:  
Building Owners & Managers Association of Austin

03/17/2009

Contributor address: City: State: Zip Code  
PO Box 200532  
Austin, TX 78720

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The ~~INSTRUCTION~~ GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/39 Report: 9/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

03/10/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bourgeois, Gregory6 Contributor address; City; State; Zip Code  
1700 Bridgeway  
Austin, TX 787047 Amount of  
contribution (\$)

\$200.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Civil Engineer10 Employer (See Instructions)  
Jones & Carter

Date

02/14/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bozeman, WilliamContributor address; City; State; Zip Code  
3115 Helms St. #307  
Austin, TX 78705Amount of  
contribution (\$)

\$125.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brooks, SuzeeContributor address; City; State; Zip Code  
4900 Avenue H.  
Austin, TX 78751Amount of  
contribution (\$)

\$202.64

In-kind contribution  
description (if applicable)  
Event Expense(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Brown McCarroll, L.L.P.Contributor address; City; State; Zip Code  
111 Congress Ave., Ste. 1400  
Austin, TX 78701-4043Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Buford, Jr., RobertContributor address; City; State; Zip Code  
P.O. Box 5606  
Austin, TX 78763Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

*The Instruction Guide explains how to complete this form.*

**1** Total pages Schedule A:  
Schedule: 8/39 Report: 10/58

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission Filers)  
00121212

**4** Date  
  
02/12/2009

**5** Full name of contributor ☐ out-of-state PAC (ID#:  
Bush, Peter

**6** Contributor address; City; State; Zip Code  
1797 Sandy Creek Rd.  
Red Rock, TX 78662

**7** Amount of  
contribution (\$) \$100.00

**8** In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date  
  
03/24/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Butler, Susan

Contributor address; City; State; Zip Code  
6710 Bryn Mawr  
Austin, TX 78723

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
03/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Carter, William & Kristi

Contributor address; City; State; Zip Code  
1701 Fall Creek Dr.  
Cedar Park, TX 78613

Amount of  
contribution (\$) \$700.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
President & General Manager/CEO

Employer (See Instructions)  
SuperShuttle/Carter Transportation Services

Date  
  
01/29/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Camp Dresser McKee PAC

Contributor address; City; State; Zip Code  
3050 Post Oak Blvd. Ste 300  
Houston, TX 77056

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
03/17/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
CH2MHILL Texas PAC

Contributor address; City; State; Zip Code  
12377 Ment Dr. 10th Floor  
Dallas, TX 75251

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:  
Schedule: 9/39 Report: 11/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission Filers)  
00121212

4 Date

01/30/2009

5 Full name of contributor ☐ out-of-state PAC (ID#:  
Chan, Raymond & Grace

6 Contributor address; City; State; Zip Code  
1605 Churchwood Cove  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Engineer/Finance Manager

10 Employer (See Instructions)  
Raymond Chan & Associates/Raymond Chan & Assoc.

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Chang, Chi-Tong

Contributor address; City; State; Zip Code  
13401 Wyoming Valley Dr.  
Austin, TX 78727

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Chen, Sam

Contributor address; City; State; Zip Code  
5000 Mission Oaks Blvd. 24  
Austin, TX 78735

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Banister Oaks Hotel, Inc.

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Chu, Millie

Contributor address; City; State; Zip Code  
8629 C Toro Creek Cove  
Austin, TX 78759

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Office Manager

Employer (See Instructions)  
Frank Lam & Associates

Date

03/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Clark, Steve

Contributor address; City; State; Zip Code  
4210 River Garden Trail  
Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Chairman

Employer (See Instructions)  
Cypress Real Estate Advisors, Inc.

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/39 Report: 12/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  01/22/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clarke, Margot  6 Contributor address; City; State; Zip Code 5106 Evergreen Ct Austin, TX 78731	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Researcher		10 Employer (See Instructions) State of Texas	
Date  02/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark-Madison, Michael  Contributor address; City; State; Zip Code 907 E. 15th St. Austin, TX 78702	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clayton, Brenda  Contributor address; City; State; Zip Code 5807 Shoal Creek Blvd. Austin, TX 78757	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Kelly, Hart & Hallman	
Date  03/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clements, Andrew  Contributor address; City; State; Zip Code 1014 e. 9TH Street Austin, TX 78702	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clinton, Ryan  Contributor address; City; State; Zip Code 5320 Krueger Lane Austin, TX 78723	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/39 Report: 13/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

02/27/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Compton, Sean

6 Contributor address; City; State; Zip Code  
2601 Great Oaks Pkwy.  
Austin, TX 78756

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Conrad, Christopher

Contributor address; City; State; Zip Code  
19820 Domick Hill Lane  
Pflugerville, TX 78660

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Land Surveyor

Employer (See Instructions)  
McGray & McGray Land Surveyors

Date

03/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Coopwood, Thomas

Contributor address; City; State; Zip Code  
6717 Valburn Dr  
Austin, TX 78731-1803

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Copinga, Jacob

Contributor address; City; State; Zip Code  
2132 Fardown  
Holladay, UT 84121

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Self

Date

03/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cotton, Jim

Contributor address; City; State; Zip Code  
11000 Spicewood Pkwy.  
Austin, TX 78750-3404

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
real estate broker

Employer (See Instructions)  
McAllister & Associates

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/39 Report: 14/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  03/17/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowden, Allen  6 Contributor address; City; State; Zip Code 5703 Bull Creek Austin, TX 78756	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cox, Carla  Contributor address; City; State; Zip Code 1605 Westover Rd. Austin, TX 78703	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craighead, Garry  Contributor address; City; State; Zip Code 108 Haneman Cv. Leander, TX 78641	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self	
Date  01/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cuellar, Olga  Contributor address; City; State; Zip Code 5905 Tom Wooten DR Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cummins, Clemmie  Contributor address; City; State; Zip Code 1403 W. 10th St. Austin, TX 78703	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) HR Communications writer/editor		Employer (See Instructions) City of Austin	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/39 Report: 15/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

02/10/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Damuth, Steven6 Contributor address; City; State; Zip Code  
PO Box 684909  
Austin, TX 787687 Amount of  
contribution (\$)

\$300.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
Carpenter10 Employer (See Instructions)  
Self

Date

02/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Devaney, JasonContributor address; City; State; Zip Code  
313 A Elizabeth  
Austin, TX 78704Amount of  
contribution (\$)

\$189.38

In-kind contribution  
description (if applicable)  
Event Expense(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dibrell, WillContributor address; City; State; Zip Code  
1703 Alta Vista Ave  
Austin, TX 78704Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
attorneyEmployer (See Instructions)  
Graves, Dougherty, Hearon & Moody, P.C.

Date

03/09/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dobson, CaseyContributor address; City; State; Zip Code  
1517 Northwood  
Austin, TX 78703Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
attorneyEmployer (See Instructions)  
Scott, Douglass & McConnico, L.L.P.

Date

03/30/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Donovan, BrianContributor address; City; State; Zip Code  
508 Genard St.  
Austin, TX 78751Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/39 Report: 16/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  01/22/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dorn, Edwin  6 Contributor address: City: State: Zip Code Box Y University Station Austin, TX 78713	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dryden, Kenny  Contributor address: City: State: Zip Code 3305 Northland Dr., Ste. 212 Austin, TX 78731	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) real estate		Employer (See Instructions) Self	
Date  03/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ducloux, Claude  Contributor address: City: State: Zip Code 3512 Native Dancer Cove Austin, TX 78746	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dwyer, James  Contributor address: City: State: Zip Code 11017 Rio Vista Dr. Austin, TX 78726	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Christopher  Contributor address: City: State: Zip Code 1705 Rebb Road Austin, TX 78704	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 15/39 Report: 17/58

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

**4** Date

03/26/2009

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Fairbrother, Paul

**6** Contributor address; City; State; Zip Code  
1010 Mopac Circle  
Ste. 200  
Austin, TX 78748

**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

**9** Principal occupation / Job title (See Instructions)  
Consultant

**10** Employer (See Instructions)  
Government Partners

Date

03/19/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Falkenberg, Howard

Contributor address; City; State; Zip Code  
P.O. Box 123  
Austin, TX 78767

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Staats Falkenberg & Partners, Inc.

Date

03/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Farmer, Gary

Contributor address; City; State; Zip Code  
309 Lake Cliff Trail  
Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)  
Heritage Title Company of Austin

Date

02/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Flores, Johnny

Contributor address; City; State; Zip Code  
16204 Double Eagle Dr.  
Austin, TX 78717

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Frederick, David

Contributor address; City; State; Zip Code  
414 Ridgewood Rd  
Austin, TX 78746

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/39 Report: 18/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  02/11/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) French, Dorian  6 Contributor address; City; State; Zip Code 4104 River Plaza Blvd. Austin, TX 78730	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) Brown & Gay Engineers	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frensley, Nathalie  Contributor address; City; State; Zip Code 5601 Montview St. Austin, TX 78758	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT	
Date  02/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Philip  Contributor address; City; State; Zip Code 700 Lavaca, Ste 1150 Austin, TX 78701	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Philip  Contributor address; City; State; Zip Code 700 Lavaca, Ste 1150 Austin, TX 78701	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Jesus  Contributor address; City; State; Zip Code 5904 Quermus Cv. Austin, TX 78735	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Employee		Employer (See Instructions) Seton Healthcare Network	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/39 Report: 19/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

01/22/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Getter, Kerry & Becky6 Contributor address, City, State, Zip Code  
1101 East 11th St  
Austin, TX 787027 Amount of  
contribution (\$)

\$500.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
CEO / homemaker10 Employer (See Instructions)  
Balcones Resources, Inc. / none

Date

02/17/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gilg, LawrenceContributor address, City, State, Zip Code  
3908 Avenue G  
Austin, TX 78751-4706Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
EngineerEmployer (See Instructions)  
Dynalog Systems

Date

03/11/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gilles, JanetContributor address, City, State, Zip Code  
1212 Guadalupe St.  
Apt 502  
Austin, TX 78701Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Googins, AaronContributor address, City, State, Zip Code  
3302 Enfield Rd  
Austin, TX 78703Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
engineerEmployer (See Instructions)  
King Engineering

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gottesman, Sandy & LisaContributor address, City, State, Zip Code  
2902 Stratford Dr  
Austin, TX 78746Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
real estate developer / homemakerEmployer (See Instructions)  
The Gottesman Company / none

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/39 Report: 20/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  03/16/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Bob  6 Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) President & CEO		10 Employer (See Instructions) Texas Disposal Systems, Inc.	
Date  03/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, James & Janet  Contributor address; City; State; Zip Code 10531 Grand Oak Circle Austin, TX 78750	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President / homemaker		Employer (See Instructions) Texas Landfill Management / none	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hammond, Clarke  Contributor address; City; State; Zip Code 403 Chaparral Road Austin, TX 78745	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hankamer, Randy  Contributor address; City; State; Zip Code 1412 W 8th 1/2 St Austin, TX 78703	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Environmental Planner		Employer (See Instructions) RECON Environmental Consultants, Inc.	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harding, Annie  Contributor address; City; State; Zip Code 3404 A Grooms St Austin, TX 78705	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Administrative Support		Employer (See Instructions) UT Austin	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**

Schedule: 19/39 Report: 21/58

**2 FILER NAME** Spelman, William

**3 ACCOUNT #** (Ethics Commission filers)  
00121212

**4 Date**

01/22/2009

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hardman, Sylvia Fay

**6 Contributor address; City; State; Zip Code**  
8401 Shenendoah  
Austin, TX 78753

**7 Amount of  
contribution (\$)**

\$150.00

**8 In-kind contribution  
description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**9 Principal occupation / Job title (See Instructions)**

**10 Employer (See Instructions)**

**Date**

02/20/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harutunian, Anne

**Contributor address; City; State; Zip Code**  
P.O. Box W  
Austin, TX 78713

**Amount of  
contribution (\$)**

\$300.00

**In-kind contribution  
description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Engineer

**Employer (See Instructions)**  
Harutunian Engineers

**Date**

03/24/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harutunian, Garabed & Francia

**Contributor address; City; State; Zip Code**  
9504 Meadowheath Dr.  
Austin, TX 78729-2715

**Amount of  
contribution (\$)**

\$600.00

**In-kind contribution  
description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
President / Board Chairwoman

**Employer (See Instructions)**  
Kurkjian Engineering / Kurkjian Engineering

**Date**

02/20/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harutunian, Takoochy

**Contributor address; City; State; Zip Code**  
P.O. Box W  
Austin, TX 78713

**Amount of  
contribution (\$)**

\$300.00

**In-kind contribution  
description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Engineer

**Employer (See Instructions)**  
Harutunian Engineers

**Date**

02/24/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawthorne, Melissa

**Contributor address; City; State; Zip Code**  
1403 Foxwood Cove  
Austin, TX 78704

**Amount of  
contribution (\$)**

\$350.00

**In-kind contribution  
description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
consultant

**Employer (See Instructions)**  
Austin Permit Service, Inc.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/39 Report: 22/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  02/10/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Forest  6 Contributor address; City; State; Zip Code 4100 Jackson Ave. No. 311 Austin, TX 78731	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holderness, Earl  Contributor address; City; State; Zip Code 2943 Thousand Oaks Austin, TX 78746	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions) retired	
Date  01/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hyatt, Diane  Contributor address; City; State; Zip Code P.O. Box 162452 Austin, TX 78716	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Environmental Systems Manager		Employer (See Instructions) CH2MHill	
Date  01/24/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inman, Bobby  Contributor address; City; State; Zip Code 3200 Riva Ridge Road Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) investor		Employer (See Instructions) self	
Date  03/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackson, Keith  Contributor address; City; State; Zip Code 504 E. 42nd St. Austin, TX 78751-4302	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) PBS&J	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/39 Report: 23/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

01/30/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Khataw, Ali & Nahid6 Contributor address; City; State; Zip Code  
7914 Bee Caves Rd.  
Austin, TX 787467 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
President / President10 Employer (See Instructions)  
Encotech / Accurate CAD and Technical Services

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Khataw, AminaContributor address; City; State; Zip Code  
7914 Bee Caves Rd.  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
teacherEmployer (See Instructions)  
The Children's School

Date

03/28/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
King, RobertContributor address; City; State; Zip Code  
4212 Park Hollow Court  
Austin, TX 78746Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
PresidentEmployer (See Instructions)  
Good Company Associates

Date

03/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kumar, Sam & HemaContributor address; City; State; Zip Code  
1628 Westlake Dr  
Austin, TX 78746Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
President / Co-OwnerEmployer (See Instructions)  
Journeyman Const. / Journeyman Const.

Date

03/07/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kwon, J.M.Contributor address; City; State; Zip Code  
8008 Dark Valley Cv.  
Austin, TX 78737Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:  
Schedule: 22/39 Report: 24/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission Filers)  
00121212

4 Date  
01/30/2009

5 Full name of contributor ☐ out-of-state PAC (ID#:  
Lam, Frank

6 Contributor address; City; State; Zip Code  
508 W 16th St.  
Austin, TX 78701

7 Amount of  
contribution (\$) \$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
President

10 Employer (See Instructions)  
Frank Lam & Associates

Date  
01/30/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Lam, Yuk-Ching

Contributor address; City; State; Zip Code  
2508 Enfield Rd. #23  
Austin, TX 78703

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Medical Coder

Employer (See Instructions)  
Shoal Creek Hospital

Date  
02/14/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Lancaster, Rose

Contributor address; City; State; Zip Code  
1106 West 10th  
Austin, TX 78703

Amount of  
contribution (\$) \$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/12/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Landwermeyer, John

Contributor address; City; State; Zip Code  
1211 Meadow Lark Dr  
Cedar Park, TX 78613

Amount of  
contribution (\$) \$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/12/2009

Full name of contributor ☐ out-of-state PAC (ID#:  
Lockwood, Andrews, Newman, Inc. PAC

Contributor address; City; State; Zip Code  
2925 Bnarpark Dr. 4th Floor  
Houston, TX 77042

Amount of  
contribution (\$) \$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/39 Report: 25/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

01/29/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lee, Chien-Ying & Linwen

6 Contributor address; City; State; Zip Code  
8303 Pommel Cove  
Austin, TX 78759

7 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Principal / housewife

10 Employer (See Instructions)  
Haji, Lee & Associates, Inc. / none

Date

01/29/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lee, Wendy

Contributor address; City; State; Zip Code  
910 Duncan Lane #63  
Austin, TX 78705

Amount of  
contribution (\$)

\$300.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Teacher

Employer (See Instructions)  
AISD

Date

02/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lehmann, Mary

Contributor address; City; State; Zip Code  
500 Douglas #107  
Las Vegas, NV 87701

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date

03/26/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lipscombe, John

Contributor address; City; State; Zip Code  
6800 Mesa Dr.  
Austin, TX 78731

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Lowerre, Richard

Contributor address; City; State; Zip Code  
725 Patterson  
Austin, TX 78703

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/39 Report: 26/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  02/11/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lucy, Stephen  6 Contributor address; City; State; Zip Code 5524 Tar Road Midlothian, TX 76065	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) Jaster-Quintanilla Dallas, LLP	
Date  01/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynk, Steven  Contributor address; City; State; Zip Code 6004 Ronchamps Dr. Round Rock, TX 78681	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maier, Richard  Contributor address; City; State; Zip Code 1704-A Newning Ave. Austin, TX 78704	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) D.R. Horton	
Date  03/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, Pat  Contributor address; City; State; Zip Code 8300 Puerta Vista Austin, TX 78759-8029	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Donald  Contributor address; City; State; Zip Code 1221 S Mopac, Ste 115 Austin, TX 78746-7400	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) public affairs		Employer (See Instructions) Don Martin Public Affairs	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 25/39 Report: 27/58

**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date

02/28/2009

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Martinez, Roberto**6** Contributor address; City; State; Zip Code  
5905 Thames Dr.  
Austin, TX 78723**7** Amount of  
contribution (\$)

\$100.00

**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See instructions)**10** Employer (See instructions)

Date

03/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maxwell, MaryContributor address; City; State; Zip Code  
111 Laurel Lane  
Austin, TX 78705Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

01/22/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCabe, TimothyContributor address; City; State; Zip Code  
2511 McCullough St  
Austin, TX 78703Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See instructions)  
real estateEmployer (See instructions)  
Trammell Crow Company

Date

01/19/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCloskey, MichaelContributor address; City; State; Zip Code  
5133 China Garden Dr.  
Austin, TX 78730Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See instructions)  
EngineerEmployer (See instructions)  
URS

Date

01/30/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCreary, LouContributor address; City; State; Zip Code  
901 South Mopac, Ste. 300  
Austin, TX 78746Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <del>INSTRUCTION</del> GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/39 Report: 28/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  03/29/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Dennis  6 Contributor address; City; State; Zip Code 906 Crystal Creek Drive Austin, TX 78746	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGhee, Fred  Contributor address; City; State; Zip Code 6300A Carson Ridge Austin, TX 78741	Amount of contribution (\$)  \$75.99	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGray, Judith  Contributor address; City; State; Zip Code 5327 Western Hills Dr Austin, TX 78731	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) McGray & McGray Land Surveyors	
Date  01/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKetta III, John J. Mike  Contributor address; City; State; Zip Code 4200 Park Hollow Court Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody	
Date  03/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Manuel  Contributor address; City; State; Zip Code 19822 Teller Blvd Spring, TX 77388	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/39 Report: 29/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

01/22/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Medlin, Cynthia6 Contributor address; City; State; Zip Code  
2501 Wilson St.  
Austin, TX 787047 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

01/21/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Merriweather, TimothyContributor address; City; State; Zip Code  
11605 Broad Oaks Drive  
Austin, TX 78759Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moore, ChrisContributor address; City; State; Zip Code  
330 Monarch Lane  
Austin, TX 78737Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Moriarty, WilliamContributor address; City; State; Zip Code  
400 N. Lowell Lane  
Austin, TX 78733Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
requested

Date

01/17/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Mueller, ElizabethContributor address; City; State; Zip Code  
3213 French Place  
Austin, TX 78722Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
ProfessorEmployer (See Instructions)  
University of Texas

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/39 Report: 30/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  02/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myers, Teresa  6 Contributor address; City; State; Zip Code 823 Hams Ave Austin, TX 78705	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  01/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neeley, Charles  Contributor address; City; State; Zip Code 8803 Splitarrow Dr. Austin, TX 78717	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nias, James  Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin, TX 78704	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Jackson Walker L.L.P.	
Date  03/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Guy  Contributor address; City; State; Zip Code 3267 Bee Cave Rd , #107 #92 Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) V&S Enterprises	
Date  03/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Jason  Contributor address; City; State; Zip Code 3267 Bee Cave Rd , #107 #92 Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) V&S Enterprises	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/39 Report: 31/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  03/16/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Stacy  6 Contributor address; City; State; Zip Code 3267 Bea Cave Rd. #107 #92 Austin, TX 78746	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Executive		10 Employer (See Instructions) V&S Enterprises	
Date  03/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Vicki  Contributor address; City; State; Zip Code 3267 Bea Cave Rd. #107 PMB # 92 Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) V&S Enterprises	
Date  03/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PANTEX PAC  Contributor address; City; State; Zip Code 111 Congress Ave, Suite 1400 Austin, TX 78701	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paterson, Robert  Contributor address; City; State; Zip Code 1904 Newning Ave. Austin, TX 78704	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pedersen, Craig  Contributor address; City; State; Zip Code 4703 Trail Crest Circle Austin, TX 78735	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President - Water Resources - Texas		Employer (See Instructions) URS	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/39 Report: 32/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  03/17/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pence, Bert  6 Contributor address; City; State; Zip Code 708 Rio Grande Austin, TX 78701	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Personett, Michael  Contributor address; City; State; Zip Code 2802 Jorwoods Dr. Austin, TX 78745	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Gregory  Contributor address; City; State; Zip Code 4100 Michael Neill Dr. Austin, TX 78730	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pinnelli, Janis & Joe  Contributor address; City; State; Zip Code P.O. Box 50038 Austin, TX 78763	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) general contractors / contractor		Employer (See Instructions) J. Pinnelli & Co. / J. Pinnelli & Co.	
Date  01/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Price, Velva  Contributor address; City; State; Zip Code 1601 Ridgemont Dr. Austin, TX 78723	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Hubert Bell	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 31/39 Report: 33/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

01/21/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rai, Sheela6 Contributor address; City; State; Zip Code  
1217 W. 8th St.  
Austin, TX 787037 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)  
requested

Date

02/24/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, FrancesContributor address; City; State; Zip Code  
1475 Federal Heights Dr.  
Salt Lake City, UT 84103-4443Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
advertisingEmployer (See Instructions)  
Reagan Advertising

Date

02/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, LucilleContributor address; City; State; Zip Code  
4231 Westlako Dr, Apt 1D  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
advertisingEmployer (See Instructions)  
self

Date

02/23/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan, William and JuliaContributor address; City; State; Zip Code  
1492 Penrose Dr.  
Salt Lake City, UT 84103Amount of  
contribution (\$)

\$700.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
advertising / advertisingEmployer (See Instructions)  
self / self

Date

02/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reagan II, WilliamContributor address; City; State; Zip Code  
4100 McBryne Place  
Austin, TX 78746Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
ExecutiveEmployer (See Instructions)  
Reagan Advertising

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:  
Schedule: 32/39 Report: 34/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission Filers)  
00121212

4 Date

02/17/2009

5 Full name of contributor

Richards, Daniel

☐ out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

816 Congress Ave. Ste 1200

Austin, TX 78701

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)  
Hilgers, Bell & Richards

Date

02/05/2009

Full name of contributor

Roma Austin Collaborate Design Studio, PLLC

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

515 Congress Ave., Ste 1600

Austin, TX 78701

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/12/2009

Full name of contributor

Ross, Lauren

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3610 Moon River Rd.

Austin, TX 78746

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2009

Full name of contributor

Roth, Danny

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1503 Wild Cat Hollow

Austin, TX 78746

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Southwest Strategies Group, Inc.

Date

01/15/2009

Full name of contributor

Rutishauser, Robert

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

6101 Mount Villa Cove

Austin, TX 78731

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 33/39 Report: 35/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

03/12/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Schissler, James

6 Contributor address; City; State; Zip Code  
6556 Needham Lane  
Austin, TX 78739

7 Amount of  
contribution (\$)

\$200.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
landscape design / civil engineer

10 Employer (See Instructions)  
Jones & Carter

Date

03/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Sepulveda, Eugene

Contributor address; City; State; Zip Code  
3114 Wheeler St.  
Austin, TX 78705-2816

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Siff, Theodore

Contributor address; City; State; Zip Code  
604 West 11th St.  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Judy

Contributor address; City; State; Zip Code  
2602 Broken Oak  
Austin, TX 78745

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Controller

Employer (See Instructions)  
Journeyman Construction

Date

02/18/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Kent

Contributor address; City; State; Zip Code  
5304 Magdalena Drive  
Austin, TX 78735

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		1 PAGE # Schedule: 34/39 Report: 36/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  01/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Soeur, Channy and Laura  6 Contributor address; City; State; Zip Code 2004 Gann Hill Dr. Cedar Park, TX 78613	7 Amount of contribution (\$)  \$700.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Engineer / Office Manager		10 Employer (See Instructions) CAS Consulting & Services / CAS Consulting & Services	
Date  01/21/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Soeur, Michelle  Contributor address; City; State; Zip Code 2004 E. Gann Hill Dr. Cedar Park, TX 78613	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Jennifer Regalado-Ellis, OD	
Date  01/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Soifer, Jan  Contributor address; City; State; Zip Code 5408 Hurlock Drive Austin, TX 78731	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  01/10/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speck, Lawrence  Contributor address; City; State; Zip Code 800 W. 5th St., Apt. 1102 Austin, TX 78703	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) architect		Employer (See Instructions) Page Southerland Page	
Date  03/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swaffer, Robert  Contributor address; City; State; Zip Code 906 W. 17th St Austin, TX 78701	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**

Schedule: 35/39 Report: 37/58

**2 FILER NAME** Spelman, William

**3 ACCOUNT #** (Ethics Commission filers)  
00121212

**4 Date**  
  
02/17/2009

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Texas Working Families PAC

**6 Contributor address; City; State; Zip Code**  
Texas Working Families PAC  
5747 Greyrock  
San Antonio, TX 78228

**7 Amount of contribution (\$)**  
  
\$100.00

**8 In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**9 Principal occupation / Job title (See Instructions)**

**10 Employer (See Instructions)**

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thomas, H Grant

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/03/2009

Contributor address; City; State; Zip Code  
4106 Avenue F  
Austin, TX 78751

\$200.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Teacher

Employer (See Instructions)  
UT

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tipps, Lisa

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/20/2009

Contributor address; City; State; Zip Code  
3203 French Pl.  
Austin, TX 78722

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Tovo, Kathryne

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/21/2009

Contributor address; City; State; Zip Code  
800 Christopher St.  
Austin, TX 78704

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Uribe, Hector

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/17/2009

Contributor address; City; State; Zip Code  
1105 Elm St.  
Austin, TX 78703-4826

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The instruction Guide explains how to complete this form.		1 PAGE # Schedule: 36/39 Report: 38/58	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  02/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Bavel, Nick  6 Contributor address; City; State; Zip Code 213 W 41st St Austin, TX 78751	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions) Self	
Date  01/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waring, Colleen  Contributor address; City; State; Zip Code 4700 Fm 3242 Cameron, TX 76520	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warneke, Jean  Contributor address; City; State; Zip Code P.O. Box 2388 Austin, TX 78768	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warneke Jr., Bob  Contributor address; City; State; Zip Code P.O. Box 2388 Austin, TX 78768	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas	
Date  03/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warth, Dan  Contributor address; City; State; Zip Code 2716 Rio Mesa Dr. Austin, TX 78732	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) URS	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/39 Report: 39/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

02/01/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whatley, John6 Contributor address; City; State; Zip Code  
2909 W. 35th St.  
Austin, TX 787037 Amount of  
contribution (\$) \$100.008 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

03/27/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
White, MichaelContributor address; City; State; Zip Code  
3435 Shiraz Loop  
Round Rock, TX 78665Amount of  
contribution (\$) \$350.00In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Vice PresidentEmployer (See Instructions)  
Journeyman Construction

Date

02/02/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whitfield, GailContributor address; City; State; Zip Code  
1520 Ben Crenshaw Way, Apt 221  
Austin, TX 78746-6169Amount of  
contribution (\$) \$250.00In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
OwnerEmployer (See Instructions)  
The Whitfield Company

Date

02/12/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Whitfield, JohnContributor address; City; State; Zip Code  
5900 Rain Creek Pkwy.  
Austin, TX 78759Amount of  
contribution (\$) \$175.00In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/22/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wiginton, JeannieContributor address; City; State; Zip Code  
908 E. Live Oak St.  
Austin, TX 78704Amount of  
contribution (\$) \$100.00In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The instruction Guide explains how to complete this form.

1 PAGE #

Schedule: 38/39 Report: 40/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
001212124 Date 03/26/2009 5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Winkelman, Marc

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T) ☐6 Contributor address; City; State; Zip Code  
304 Hillcrest Court  
Austin, TX 78746

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 02/12/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wooley, John C.

Amount of contribution (\$) In-kind contribution description (if applicable)

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Contributor address; City; State; Zip Code  
3609 Arrowhead Dr  
Austin, TX 78731Principal occupation / Job title (See Instructions)  
EngineerEmployer (See Instructions)  
Fugro ConsultantsDate 01/22/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Worley, John Brent

Amount of contribution (\$) In-kind contribution description (if applicable)

\$70.00

(If travel outside of Texas, complete Schedule T) ☐Contributor address; City; State; Zip Code  
4106 Avenue A  
Austin, TX 78751

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 02/23/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Worley, John Brent

Amount of contribution (\$) In-kind contribution description (if applicable)

\$75.00

(If travel outside of Texas, complete Schedule T) ☐Contributor address; City; State; Zip Code  
4106 Avenue A  
Austin, TX 78751

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 02/05/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Yates, Elyse

Amount of contribution (\$) In-kind contribution description (if applicable)

\$100.00

(If travel outside of Texas, complete Schedule T) ☐Contributor address; City; State; Zip Code  
10408 Hansa Dr.  
Austin, TX 78739

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The Instruction Guide explains how to complete this form.		<b>1 PAGE #</b> Schedule: 39/39 Report: 41/58	
<b>2 FILER NAME</b> Spelman, William		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00121212	
<b>4 Date</b>  03/05/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Zuniga, Diana  ..... <b>6 Contributor address; City; State; Zip Code</b> 4705 Timberline Dr Austin, TX 78746	<b>7 Amount of contribution (\$)</b>  \$350.00	<b>8 In-kind contribution description (if applicable)</b>      (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b> President/Owner		<b>10 Employer (See Instructions)</b> Investors Alliance, Inc.	

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 1/16 Report: 42/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date 03/20/2009	5 Payee name Apple Annies Payee address; City; State; Zip Code PO Box 684806 Austin, TX 78768	7 Amount (\$) \$218.45
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8 Purpose of payment (See instructions regarding type of information required.)  
Event Expense-food for event

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

(If travel outside of Texas, complete Schedule T)

Date 02/24/2009	Payee name Yznaga, Mark Payee address; City; State; Zip Code 2401 Brairgrove Drive Austin, TX 78704	Amount (\$) \$1,000.00
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Purpose of payment (See instructions regarding type of information required.)  
Salary

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

(If travel outside of Texas, complete Schedule T)

Date 03/30/2009	Payee name CheckMark Typesetting Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722	Amount (\$) \$30.31
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Purpose of payment (See instructions regarding type of information required.)  
Printing

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

(If travel outside of Texas, complete Schedule T)

Date 03/17/2009	Payee name Yznaga, Mark Payee address; City; State; Zip Code 2401 Brairgrove Drive Austin, TX 78704	Amount (\$) \$1,000.00
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Purpose of payment (See instructions regarding type of information required.)  
Yard signs, labels, bumper stickers

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

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 2/16 Report: 43/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  
  
03/20/2009

5 Payee name  
Cuatros  
  
6 Payee address; City; State; Zip Code  
1004 W 24th St.  
Austin, TX 78705

7 Amount  
(\$)  
  
\$83.66

8 Purpose of payment (See instructions regarding type of information required.)  
Event Expense-food for event  
  
(If travel outside of Texas, complete Schedule T)

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

Date  
  
01/14/2009

Payee name  
Davis, Ian  
  
Payee address; City; State; Zip Code  
600 Bouldin Ave.  
Austin, TX 78704

Amount  
(\$)  
  
\$1,500.00

Purpose of payment (See instructions regarding type of information required.)  
Salary  
  
(If travel outside of Texas, complete Schedule T)

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

Date  
  
01/27/2009

Payee name  
Davis, Ian  
  
Payee address; City; State; Zip Code  
600 Bouldin Ave.  
Austin, TX 78704

Amount  
(\$)  
  
\$1,500.00

Purpose of payment (See instructions regarding type of information required.)  
Salary  
  
(If travel outside of Texas, complete Schedule T)

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

Date  
  
02/11/2009

Payee name  
Davis, Ian  
  
Payee address; City; State; Zip Code  
600 Bouldin Ave.  
Austin, TX 78704

Amount  
(\$)  
  
\$1,500.00

Purpose of payment (See instructions regarding type of information required.)  
Salary  
  
(If travel outside of Texas, complete Schedule T)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 3/16 Report: 44/58**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date  
03/02/2009**5** Payee name  
Davis, Ian  
**6** Payee address; City; State; Zip Code  
600 Bouldin Ave.  
Austin, TX 78704**7** Amount  
(\$)  
\$1,500.00**8** Purpose of payment (See instructions regarding type of information required.)  
Salary  
  
(If travel outside of Texas, complete Schedule T)**9** .. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office heldDate  
03/17/2009Payee name  
Davis, Ian  
Payee address; City; State; Zip Code  
600 Bouldin Ave.  
Austin, TX 78704Amount  
(\$)  
\$1,500.00Purpose of payment (See instructions regarding type of information required.)  
Salary  
  
(If travel outside of Texas, complete Schedule T).. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office heldDate  
03/26/2009Payee name  
Degollado, Johnny  
Payee address; City; State; Zip Code  
609 Montopolis Drive  
Austin, TX 78741Amount  
(\$)  
\$203.25Purpose of payment (See instructions regarding type of information required.)  
Event expense-entertainment  
  
(If travel outside of Texas, complete Schedule T).. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office heldDate  
03/27/2009Payee name  
Degollado, Johnny  
Payee address; City; State; Zip Code  
609 Montopolis Drive  
Austin, TX 78741Amount  
(\$)  
\$150.00Purpose of payment (See instructions regarding type of information required.)  
Event expense-entertainment  
  
(If travel outside of Texas, complete Schedule T).. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office held**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 4/16 Report: 45/58**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  03/09/2009	<b>5</b> Payee name Facebook  <b>6</b> Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	<b>7</b> Amount (\$)  \$25.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	--

Date  03/10/2009	Payee name Facebook  Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$)  \$25.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
---	---

Date  03/11/2009	Payee name Facebook  Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$)  \$25.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date  03/13/2009	Payee name Facebook  Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$)  \$49.12
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Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 5/16 Report: 46/58**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  03/14/2009	<b>5</b> Payee name Facebook  <b>6</b> Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	<b>7</b> Amount (\$)  \$25.00
---------------------------------	--	-------------------------------------

<b>8</b> Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

Date  03/16/2009	Payee name Facebook  Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$)  \$25.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  03/23/2009	Payee name Facebook  Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$)  \$16.24
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  01/27/2009	Payee name Glazer, Matt  Payee address; City; State; Zip Code 6606 Woodhuc Dr. Austin, TX 78745	Amount (\$)  \$250.00
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Purpose of payment (See instructions regarding type of information required.) Contract Labor  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 6/16 Report: 47/58**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  01/15/2009	<b>5</b> Payee name Harry, Susan  <b>6</b> Payee address; City; State; Zip Code 2520 Longview St., Ste 211 Austin, TX 78705	<b>7</b> Amount (\$)  \$2,850.00
---------------------------------	--	--

**8** Purpose of payment (See instructions regarding type of information required.)  
Rental Expense &  
Contract Labor-Fundraising Consultant  
(If travel outside of Texas, complete Schedule T)

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

Date  02/05/2009	Payee name Harry, Susan  Payee address; City; State; Zip Code 2520 Longview St., Ste 211 Austin, TX 78705	Amount (\$)  \$2,000.00
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.)  
Contract Labor-Fundraising Consultant  
(If travel outside of Texas, complete Schedule T)

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

Date  02/18/2009	Payee name Harry, Susan  Payee address; City; State; Zip Code 2520 Longview St., Ste 211 Austin, TX 78705	Amount (\$)  \$1,150.00
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.)  
Rental Expense &  
Contract Labor-Fundraising Consultant  
(If travel outside of Texas, complete Schedule T)

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

Date  02/18/2009	Payee name Harry, Susan  Payee address; City; State; Zip Code 2520 Longview St., Ste 211 Austin, TX 78705	Amount (\$)  \$2,500.00
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.)  
Contract Labor-Fundraising Consultant  
(If travel outside of Texas, complete Schedule T)

.. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office held
**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 7/16 Report: 48/58**2 FILER NAME** Spelman, William**3 ACCOUNT #** (Ethics Commission filers)  
00121212

<b>4</b> Date  03/09/2009	<b>5</b> Payee name Harry, Susan  <b>6</b> Payee address; City; State; Zip Code 2520 Longview St., Ste 211 Austin, TX 78705	<b>7</b> Amount (\$)  \$3,150.00
---------------------------------	--	--

**8** Purpose of payment (See instructions regarding type of information required.)  
Rental Expense &  
Contract Labor-Fundraising Consultant  
(If travel outside of Texas, complete Schedule T)

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

Date  02/13/2009	Payee name iContact  Payee address; City; State; Zip Code 2635 Meridian Parkway Durham, NC 27713	Amount (\$)  \$322.15
------------------------	---	-----------------------------

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

(If travel outside of Texas, complete Schedule T)

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

Date  03/05/2009	Payee name iContact  Payee address; City; State; Zip Code 2635 Meridian Parkway Durham, NC 27713	Amount (\$)  \$322.15
------------------------	---	-----------------------------

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

(If travel outside of Texas, complete Schedule T)

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

Date  01/27/2009	Payee name Kalambacher, Colin  Payee address; City; State; Zip Code 1003 E. 38th St Austin, TX 78705	Amount (\$)  \$300.00
------------------------	---	-----------------------------

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

(If travel outside of Texas, complete Schedule T)

**9** .. Complete if direct expenditure to benefit C/OH ..  
Candidate / Officeholder name Office sought Office held
**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 8/16 Report: 49/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  02/02/2009	5 Payee name Kelly Graphics  6 Payee address; City; State; Zip Code 1322 Lost Creek Blvd. Austin, TX 78746	7 Amount (\$)  \$730.17
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8 Purpose of payment (See instructions regarding type of information required.) Printing Expense-Yard signs  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  01/26/2009	Payee name Kinko's  Payee address; City; State; Zip Code 2901-C Medical Arts Austin, TX 78705	Amount (\$)  \$46.28
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Printing expenses-Copies  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date  03/17/2009	Payee name Kinko's  Payee address; City; State; Zip Code 2901-C Medical Arts Austin, TX 78705	Amount (\$)  \$179.33
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Printing expenses-copies  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date  03/24/2009	Payee name Marcel Rodriguez Productions  Payee address; City; State; Zip Code 1043 Rosemont St. Austin, TX 78723	Amount (\$)  \$150.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.) video production  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 9/16 Report: 50/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date	5 Payee name	7 Amount (\$)
01/29/2009	Karl Thomas Musselman	
	6 Payee address; City: State: Zip Code	\$250.00
	1512 A Pennsylvania Ave. Austin, TX 78702	

8 Purpose of payment (See instructions regarding type of information required.)  
Contract Labor  
  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
03/30/2009	Karl Thomas Musselman	
	Payee address; City: State: Zip Code	\$250.00
	1512 A Pennsylvania Ave. Austin, TX 78702	

Purpose of payment (See instructions regarding type of information required.)  
Contract Labor  
  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
03/26/2009	Nuevo Leon	
	Payee address; City: State: Zip Code	\$694.38
	1501 E 6th St. Austin, TX 78702	

Purpose of payment (See instructions regarding type of information required.)  
Event Expense-food & meeting space for event  
  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
02/19/2009	Oak Hill Gazette	
	Payee address; City: State: Zip Code	\$390.00
	7200 W. Hwy 71 Austin, TX 78735	

Purpose of payment (See instructions regarding type of information required.)  
Advertising  
  
(If travel outside of Texas, complete Schedule T)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 10/16 Report: 51/58**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  02/21/2009	<b>5</b> Payee name Office Max  <b>6</b> Payee address; City; State; Zip Code 907 West 5th St. Austin, TX 78703	<b>7</b> Amount (\$)  \$4.72
---------------------------------	--	------------------------------------

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Other expenses-Office supplies  (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
---	--

Date  02/24/2009	Payee name Office Max  Payee address; City; State; Zip Code 907 West 5th St. Austin, TX 78703	Amount (\$)  \$90.88
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Other expenses-Office supplies  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  03/10/2009	Payee name Office Max  Payee address; City; State; Zip Code 907 West 5th St. Austin, TX 78703	Amount (\$)  \$16.23
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Other expenses-Office supplies  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  03/16/2009	Payee name Office Max  Payee address; City; State; Zip Code 907 West 5th St. Austin, TX 78703	Amount (\$)  \$42.15
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Other expenses-Office supplies  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

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

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 11/16 Report: 52/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  03/30/2009	5 Payee name PayPal  6 Payee address; City; State; Zip Code PO Box 7022 Mountain View, CA 94039	7 Amount (\$)  \$289.44
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8 Purpose of payment (See instructions regarding type of information required.) Credit Card processing fees for online donations (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  01/29/2009	Payee name Ranes, Jim  Payee address; City; State; Zip Code 1501 Barton Springs Rd. #233 Austin, TX 78704	Amount (\$)  \$124.95
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Printing expense-graphic design (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  01/26/2009	Payee name Scholz  Payee address; City; State; Zip Code 1607 San Jacinto Blvd. Austin, TX 78701	Amount (\$)  \$904.98
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Event expense-food & meeting space for event (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  03/17/2009	Payee name Scholz  Payee address; City; State; Zip Code 1607 San Jacinto Blvd. Austin, TX 78701	Amount (\$)  \$80.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Event expense-food & meeting space for event (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 12/16 Report: 53/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  03/18/2009	5 Payee name Smith, Jeff  6 Payee address; City; State; Zip Code 906 Rio Grande Austin, TX 78701	7 Amount (\$)  \$500.00
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8 Purpose of payment (See instructions regarding type of information required.) Polling expense  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  02/23/2009	Payee name Taco Shack  Payee address; City; State; Zip Code 402 Brazos Austin, TX 78701	Amount (\$)  \$50.28
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Purpose of payment (See instructions regarding type of information required.) Food/Beverage Expense  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  03/09/2009	Payee name Taco Shack  Payee address; City; State; Zip Code 402 Brazos Austin, TX 78701	Amount (\$)  \$50.28
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Food/Beverage Expense  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  01/22/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$27.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Advertising expense-postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 13/16 Report: 54/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  01/22/2009	5 Payee name USPS  6 Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	7 Amount (\$)  \$54.00
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8 Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  01/22/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$60.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  02/02/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$84.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  02/09/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$675.00
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 14/16 Report: 55/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  02/20/2009	5 Payee name USPS  6 Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	7 Amount (\$)  \$275.40
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8 Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  02/20/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$2.16
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Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  02/20/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$32.40
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date  03/24/2009	Payee name USPS  Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	Amount (\$)  \$42.00
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 15/16 Report: 56/58

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  03/16/2009	<b>5</b> Payee name UT Campus Computer Store  ..... <b>6</b> Payee address; City; State; Zip Code 220 Inner Campus Drive Austin, TX 78712	<b>7</b> Amount (\$)  \$190.50
---------------------------------	---	---

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Accounting Expense-software  (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	--

Date  02/09/2009	Payee name Watson, Courtney  ..... Payee address; City; State; Zip Code 11102 Prairie Dove Circle Austin, TX 78758	Amount (\$)  \$500.00
------------------------	--	--------------------------------

Purpose of payment (See instructions regarding type of information required.) Salary  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  03/06/2009	Payee name Watson, Courtney  ..... Payee address; City; State; Zip Code 11102 Prairie Dove Circle Austin, TX 78758	Amount (\$)  \$750.00
------------------------	--	--------------------------------

Purpose of payment (See instructions regarding type of information required.) Salary  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  03/24/2009	Payee name Watson, Courtney  ..... Payee address; City; State; Zip Code 11102 Prairie Dove Circle Austin, TX 78758	Amount (\$)  \$375.00
------------------------	--	--------------------------------

Purpose of payment (See instructions regarding type of information required.) Salary  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 16/16 Report: 57/58

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  02/12/2009	5 Payee name Wufoo  6 Payee address; City; State; Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	7 Amount (\$)  \$49.90
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8 Purpose of payment (See instructions regarding type of information required.) Website  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  03/19/2009	Payee name Wufoo  Payee address; City; State; Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	Amount (\$)  \$24.95
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Internet fees  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  02/04/2009	Payee name Yznaga, Mark  Payee address; City; State; Zip Code 2401 Briargrove Drive Austin, TX 78704	Amount (\$)  \$2,000.00
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Purpose of payment (See instructions regarding type of information required.) Consulting  (If travel outside of Texas, complete Schedule T)	** 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 (\$)
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Purpose of payment (See instructions regarding type of information required.)  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule G:  
Schedule: 1/1 Report: 58/58

**2** FILER NAME  
Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  03/06/2009	<b>5</b> Payee name City of Austin	<b>8</b> Amount (\$)  \$500.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	<b>6</b> Payee address; City; State; Zip Code PO Box 1088 Austin, TX 78767	
	<b>7</b> Purpose of expenditure (See instructions regarding type of information required.) filing fee (If travel outside of Texas, complete Schedule T)	
Date	Payee name Payee address; City; State; Zip Code  Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)    <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code  Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)    <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code  Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)    <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code  Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$)    <input type="checkbox"/> Reimbursement from political contributions intended

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

**Bill Spelman**

SCHEDULE V – attach to form C/OH  
PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF  
Reference 2-2-14, Austin City Code

Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

Name of person soliciting  
contributions: William Reagan  
Address: 4100 McBrine Place, Austin, TX, 78746

Name of person soliciting  
contributions: Channy Soeur  
Address: 2004 East Gann Hill Drive, Cedar Park, TX, 78613

FORM COR-C/OH

# **CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER**

<b>1 ACCOUNT #</b> 00121212		<b>2 Total pages filed:</b> 20		<b>OFFICE USE ONLY</b>				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST	MI	Date Received				
	NICKNAME	LAST	SUFFIX					
<b>4 ORIGINAL REPORT TYPE</b>	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Postmarked				
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Receipt #				
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Processed				
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report		Data Imaged				
<b>5 ORIGINAL PERIOD COVERED</b>		Month	Day	Year	Month	Day	Year	
		03	31	09	THROUGH	04	29	09

**6 EXPLANATION OF CORRECTION**

1. Update maintained contribution balance.
2. Corrected the following contributors: Austin Board of Realtors to Austin Board of Realtors PAC
3. Detailed description of expenditures:
  - a) Alan Pogue
  - b) Courtney Watson
  - c) Office Max
  - d) Rindy Miller Media
  - e) Worley Printing
  - f) Karl Thomas (KT) Musselman
  - g) Remove expenditure accounted for twice. (4/7/09 to Courtney Watson for event reimbursement)
  - h) Edit vendor in expenditure (4/15/09 change from Courtney Watson to USPS)

**7 AFFIDAVIT**

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

Check ONLY if applicable:



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 W. Spelman this the 13<sup>th</sup> day of July.

20 14 to certify which witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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

# 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) 00121212	2 PAGE # 1 of 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST William	MI
	NICKNAME	LAST Spelman	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 13534 Austin, TX 78711		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST David	MI
	NICKNAME	LAST Anderson	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1515 Oxford Avenue Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 924-2393		
8 REPORT TYPE	<input 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 checked="" 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 03/31/2009    04/29/2009		
10 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05/09/2009		
11 OFFICE	12 OFFICE SOUGHT (if known) City Council District 5		
13 NOTICE OF 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		
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****15 C/OH NAME** Spelman, William**16 ACCOUNT #** (Ethics Commission Filers)  
00121212**17 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

\*\* This box is for notice of political contributions accepted or political expenditures made 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

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 11,365.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 12756.39

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 25,499.51

**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

**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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath\_\_\_\_\_  
Printed name of officer administering oath\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Schedule: 1/10 Report: 3/18	
2 FILER NAME Spelman, William		3 ACCOUNT # (Ethics Commission Filers) 00121212	
4 Date  04/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Austin Apartment Assn, PAC  6 Contributor address; City; State; Zip Code 4107 Medical Parkway Austin, TX 78756	7 Amount of contribution (\$)  \$350.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  04/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Austin Board of Realtors PAC Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756	Amount of contribution (\$)  \$350.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Barnes, Ben Contributor address; City; State; Zip Code 1706 Windsor Austin, TX 78703	Amount of contribution (\$)  \$350.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date  04/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Barnes, Melanie Contributor address; City; State; Zip Code 1706 Windsor Austin, TX 78703	Amount of contribution (\$)  \$350.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	
Date  04/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bartram, John Contributor address; City; State; Zip Code 204 East Milton St. Austin, TX 78704	Amount of contribution (\$)  \$350.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/10 Report: 4/18

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Beckham, Kimberly (Ms.)

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

04/01/2009

6 Contributor address; City; State; Zip Code  
11205  
Limoncillo Court  
Austin, TX 78750

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Attorney

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bednar, William (Mr.)

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

04/09/2009

Contributor address; City; State; Zip Code  
712  
West 14th Street A  
Austin, TX 78701

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Belton, Rudy (Mr.)

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

04/01/2009

Contributor address; City; State; Zip Code  
505 East H Street  
Austin, TX 78762

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Investor

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bernstein, Joshua (Mr.)

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

04/01/2009

Contributor address; City; State; Zip Code  
801 West 5th Street  
Apt 808  
Austin, TX 78703

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Blood, Michelle (Ms.)

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

04/23/2009

Contributor address; City; State; Zip Code  
4100 Bradwood Road  
Austin, TX 78722

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/10 Report: 5/18	
2 FILER NAME Spelman, William (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  04/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Frank (Mr.)		7 Amount of contribution (\$)  \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 802 Coqueina Lane Austin, TX 78748			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions)		
Date  04/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byars, Samuel (Mr.)		Amount of contribution (\$)  \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2103 Schyille Avenue Austin, TX 78703			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions)		
Date  04/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cagle, Gregory (Mr.)		Amount of contribution (\$)  \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4182 Travis County Circle Austin, TX 78738			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions)		
Date  04/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carton, Johnk (Mr.)		Amount of contribution (\$)  \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4903 South Crest Drive Austin, TX 78748			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions)		
Date  04/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cartledge, Ron (Mr.)		Amount of contribution (\$)  \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1802 Woodland Austin, TX 78741			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 4/10 Report: 6/18

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

04/01/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Clark Thomas & Winters PAC

6 Contributor address; City; State; Zip Code

300 West 6th Street  
Austin, TX 78701

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/01/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Collins, Sharlene (Ms.)

Contributor address; City; State; Zip Code

1400 Yaupon  
Austin, TX 78748

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

04/23/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Connolly, Walter (Mr.)

Contributor address; City; State; Zip Code

401 Texas Drive  
Austin, TX 78633

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
manager

Employer (See Instructions)

Date

04/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Cook, Jennifer (Ms.)

Contributor address; City; State; Zip Code

300 west 6th  
Austin, TX 78701

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Cooksey, Frank (Mr.)

Contributor address; City; State; Zip Code

2208 Matthews Drive  
Austin, TX 78703

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**

Schedule: 5/10 Report: 7/18

**2 FILER NAME** Spelman, William (Mr.)

**3 ACCOUNT #** (Ethics Commission filers)  
00121212

**4 Date**

04/13/2009

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Crockett Jr, M. H. (Mr.)

**6 Contributor address; City; State; Zip Code**  
P.O Box  
Austin, TX 78768

**7 Amount of contribution (\$)**

\$350.00

**8 In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**9 Principal occupation / Job title (See Instructions)**  
Real Estate

**10 Employer (See Instructions)**

**Date**

04/04/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Dibrell, Joe (Mr.)

**Contributor address; City; State; Zip Code**  
2107 Griswold Lane  
Austin, TX 78703

**Amount of contribution (\$)**

\$50.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date**

04/01/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Donovan, Brian (Mr.)

**Contributor address; City; State; Zip Code**  
503 Genard  
Austin, TX 78751

**Amount of contribution (\$)**

\$100.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date**

04/03/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Eaton, David (Mr.)

**Contributor address; City; State; Zip Code**  
3702 Hidden Hollow  
Austin, TX 78731

**Amount of contribution (\$)**

\$250.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Teacher

**Employer (See Instructions)**

**Date**

04/13/2009

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Garza, Rancho (Mr.)

**Contributor address; City; State; Zip Code**  
17830 Serene Hills  
Austin, TX 78738

**Amount of contribution (\$)**

\$350.00

**In-kind contribution description (if applicable)**

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Real Estate

**Employer (See Instructions)**

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The instruction guide explains how to complete this form.

1 PAGE #

Schedule: 6/10 Report: 8/18

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

04/13/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gregory, Russell (Mr.)

6 Contributor address; City; State; Zip Code  
3 Hillside Court  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$200.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
retired

10 Employer (See Instructions)

Date

04/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Griffith, Bailey (Mr.)

Contributor address; City; State; Zip Code  
3722 Taylors Drive  
Austin, TX 78703

Amount of  
contribution (\$)

\$40.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/13/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Guess, Larry (Mr.)

Contributor address; City; State; Zip Code  
202 East Barton  
Temple, TX 76501

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Builder

Employer (See Instructions)

Date

04/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gullatt, Dowe (Mr.)

Contributor address; City; State; Zip Code  
3801 Edgemont  
Austin, TX 78731

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hawkins, Mark (Mr.)

Contributor address; City; State; Zip Code  
5805 Carryback Lane  
Austin, TX 78746

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.				<b>1 PAGE #</b> Schedule: 7/10 Report: 9/18	
<b>2 FILER NAME</b> Spelman, William (Mr.)				<b>3 ACCOUNT #</b> (Ethics Commission filers) 00121212	
<b>4 Date</b>  04/01/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Hollingsworth, W.S. (Mr.)		<b>7 Amount of contribution (\$)</b>  \$350.00	<b>8 In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>6 Contributor address; City; State; Zip Code</b> 504 Furlong Drive Austin, TX 78746					
<b>9 Principal occupation / Job title (See Instructions)</b> Attorney			<b>10 Employer (See Instructions)</b>		
<b>Date</b>  04/01/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Kenneth (Mr.)		<b>Amount of contribution (\$)</b>  \$350.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Contributor address; City; State; Zip Code</b> 101 Crestwood Ct Austin, TX 78748					
<b>Principal occupation / Job title (See Instructions)</b> Attorney			<b>Employer (See Instructions)</b>		
<b>Date</b>  04/11/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Kargbo, Edward (Mr.)		<b>Amount of contribution (\$)</b>  \$350.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Contributor address; City; State; Zip Code</b> 7200 Waterline Road Austin, TX 78731					
<b>Principal occupation / Job title (See Instructions)</b> Driver			<b>Employer (See Instructions)</b>		
<b>Date</b>  04/02/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Kasper, Kristopher (Mr.)		<b>Amount of contribution (\$)</b>  \$25.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Contributor address; City; State; Zip Code</b> 1603 Northridge Dr Austin, TX 78723					
<b>Principal occupation / Job title (See Instructions)</b>			<b>Employer (See Instructions)</b>		
<b>Date</b>  04/01/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Krumme, Greg (Mr.)		<b>Amount of contribution (\$)</b>  \$350.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Contributor address; City; State; Zip Code</b> 100 Congress Avenue Austin, TX 78701					
<b>Principal occupation / Job title (See Instructions)</b> Attorney			<b>Employer (See Instructions)</b>		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/10 Report: 10/18

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00121212

4 Date

04/04/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Littlefield, Sue Brooks (Ms.)

6 Contributor address; City; State; Zip Code  
204 Westhaven Drive  
Austin, TX 78746

7 Amount of  
contribution (\$)

\$175.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See instructions)

10 Employer (See instructions)

Date

04/01/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maebius, Andrew (Mr.)

Contributor address; City; State; Zip Code  
3909 Balcones Drive  
Austin, TX 78731

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)  
Attorney

Employer (See instructions)

Date

04/01/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
McCullough, John (Mr.)

Contributor address; City; State; Zip Code  
3018 North Lamar Blvd  
Suite 201  
Austin, TX 78705

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

04/02/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Read, Julian (Mr.)

Contributor address; City; State; Zip Code  
327 Congress  
Suite 500  
Austin, TX 78701

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

04/08/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rigney, Robert (Mr.)

Contributor address; City; State; Zip Code  
1902 Anita Drive  
Austin, TX 78704

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/10 Report: 11/18

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rivera, Roland (Mr.)7 Amount of  
contribution (\$)8 In-kind contribution  
description (if applicable)

04/02/2009

6 Contributor address; City; State; Zip Code  
507 Harris Avenue  
Austin, TX 78705

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Scrafford, J. Bruce (Mr.)Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

04/01/2009

Contributor address; City; State; Zip Code  
105 Brookshollow Dr  
Austin, TX 78734

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Shea, Brigid (Ms.)Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

04/04/2009

Contributor address; City; State; Zip Code  
2604 Geraughty  
Austin, TX 78757

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Smith, David (Mr.)Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

04/01/2009

Contributor address; City; State; Zip Code  
100 Congress Avenue  
Austin, TX 78701

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Scott (Mr.)Amount of  
contribution (\$)In-kind contribution  
description (if applicable)

04/01/2009

Contributor address; City; State; Zip Code  
10919 Enchanted Rock  
Austin, TX 78726

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The **INSTRUCTION GUIDE** explains how to complete this form.

**1 PAGE #**

Schedule: 10/10 Report: 12/18

**2 FILER NAME** Spelman, William (Mr.)

**3 ACCOUNT #** (Ethics Commission filers)

00121212

**4 Date**

**5 Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Team, Linda (Ms.)

**7 Amount of  
contribution (\$)**

**8 In-kind contribution  
description (if applicable)**

04/02/2009

**6 Contributor address; City; State; Zip Code**  
500 Bellevue Place  
Austin, TX 78705

\$200.00

(If travel outside of Texas, complete Schedule T) ☐

**9 Principal occupation / Job title (See Instructions)**  
Realtor

**10 Employer (See Instructions)**

**Date**

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Waugh, Gene (Mr.)

**Amount of  
contribution (\$)**

**In-kind contribution  
description (if applicable)**

04/03/2009

**Contributor address; City; State; Zip Code**  
608 Harthan Street  
Austin, TX 78703

\$25.00

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date**

**Full name of contributor** ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Wheeler, Richard (Mr.)

**Amount of  
contribution (\$)**

**In-kind contribution  
description (if applicable)**

04/08/2009

**Contributor address; City; State; Zip Code**  
1903 A Crested Butte  
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

**Principal occupation / Job title (See Instructions)**  
Corporate Manager

**Employer (See Instructions)**

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 1/6 Report: 13/18

**2** FILER NAME Spelman, William (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date

04/18/2009

**5** Payee name

Checkmark Typesetting

**7**

Amount

(\$)

\$5,152.67

**6** Payee address; City; State; Zip Code3217 North IH 35  
Austin, TX 78722**8** Purpose of payment (See instructions regarding type of information required.)

signs

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

04/07/2009

Payee name

Davis, Ian (Mr.)

Amount

(\$)

\$1,500.00

Payee address; City; State; Zip Code

600 Bouldin Avenue  
Austin, TX 78704

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

campaign management

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

04/17/2009

Payee name

Davis, Ian (Mr.)

Amount

(\$)

\$750.00

Payee address; City; State; Zip Code

600 Bouldin Avenue  
Austin, TX 78704

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

campaign management

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

04/11/2009

Payee name

Facebook Advertising

Amount

(\$)

\$25.23

Payee address; City; State; Zip Code

156 University Avenue  
Palo Alto, CA 94301

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

advertising

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 2/6 Report: 14/18

**2** FILER NAME Spelman, William (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00121212**4** Date**5** Payee name

Facebook Advertising

**7** Amount

(\$)

04/13/2009

**6** Payee address; City; State; Zip Code156 University Avenue  
Palo Alto, CA 94301

\$42.16

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

advertising

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

Facebook Advertising

Amount

(\$)

04/16/2009

Payee address; City; State; Zip Code

156 University Avenue  
Palo Alto, CA 94301

\$29.97

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

advertising

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

Facebook Advertising

Amount

(\$)

04/18/2009

Payee address; City; State; Zip Code

156 University Avenue  
Palo Alto, CA 94301

\$27.11

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

advertising

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

Facebook Advertising

Amount

(\$)

04/25/2009

Payee address; City; State; Zip Code

156 University Avenue  
Palo Alto, CA 94301

\$8.72

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

advertising

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**

Schedule: 3/6 Report: 15/18

**2 FILER NAME** Spelman, William (Mr.)**3 ACCOUNT #** (Ethics Commission filers)  
00121212

<b>4 Date</b>  04/27/2009	<b>5 Payee name</b> Facebook Advertising  <b>6 Payee address; City; State; Zip Code</b> 156 University Avenue Palo Alto, CA 94301	<b>7 Amount (\$)</b>  \$25.00
---------------------------------	--	-------------------------------------

<b>8 Purpose of payment</b> (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>9 ** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

<b>Date</b>  04/28/2009	<b>Payee name</b> Facebook Advertising  <b>Payee address; City; State; Zip Code</b> 156 University Avenue Palo Alto, CA 94301	<b>Amount (\$)</b>  \$25.00
-------------------------------	--	-----------------------------------

<b>Purpose of payment</b> (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

<b>Date</b>  04/29/2009	<b>Payee name</b> Facebook Advertising  <b>Payee address; City; State; Zip Code</b> 156 University Avenue Palo Alto, CA 94301	<b>Amount (\$)</b>  \$28.88
-------------------------------	--	-----------------------------------

<b>Purpose of payment</b> (See instructions regarding type of information required.) advertising  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

<b>Date</b>  04/04/2009	<b>Payee name</b> I Contact Corporation  <b>Payee address; City; State; Zip Code</b> 2635 Meridian Parkway Durham, NC 27713	<b>Amount (\$)</b>  \$322.00
-------------------------------	--	------------------------------------

<b>Purpose of payment</b> (See instructions regarding type of information required.) email service  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 4/6 Report: 16/18

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

5 Payee name

Musselman, Karl Thomas

7 Amount  
(\$)

04/01/2009

6 Payee address: City; State; Zip Code  
1512 A Pennsylvania Avenue  
Austin, TX 78702

\$250.00

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

Consulting

(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Office Max

Amount  
(\$)

04/17/2009

Payee address: City; State; Zip Code  
907 West 5th Street  
Austin, TX 78703

\$223.03

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

Printing expense

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Office Max

Amount  
(\$)

04/17/2009

Payee address: City; State; Zip Code  
907 West 5th Street  
Austin, TX 78703

\$154.44

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

Printing expense

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Pogue, Alan

Amount  
(\$)

04/28/2009

Payee address: City; State; Zip Code  
2104 East MLK Blvd.  
Austin, TX 78702

\$ 108.25

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

Event expense-photographs

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

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

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 5/6 Report: 17/18

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  04/21/2009	5 Payee name Rindy Miller Media  6 Payee address; City; State; Zip Code 2401 East 6th St., Ste. 1003 Austin, TX 78702	7 Amount (\$)  \$550.00
--------------------------	--	-------------------------------

8 Purpose of payment (See instructions regarding type of information required.) Advertising expense-video  (If travel outside of Texas, complete Schedule T)	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
---	---

Date  04/08/2009	Payee name University Federal Credit Union  Payee address; City; State; Zip Code 4611 Guadalupe Austin, TX 78705	Amount (\$)  \$60.00
------------------------	---	----------------------------

Purpose of payment (See instructions regarding type of information required.) checks  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  04/20/2009	Payee name Mark Yznaga  Payee address; City; State; Zip Code 2401 Briargrove Austin, TX 78704	Amount (\$)  \$1,000.00
------------------------	--	-------------------------------

Purpose of payment (See instructions regarding type of information required.) Consulting  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

Date  04/15/2009	Payee name USPS  Payee address; City; State; Zip Code 510 Guadalupe Street Austin, TX 78701	Amount (\$)  \$25.52
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Postage expense- reimbursement to Courtney Watson (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 6/6 Report: 18/18

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  04/15/2009	5 Payee name Watson, Courtney  6 Payee address; City; State; Zip Code 11102 Praire Dove Circle Austin, TX 78758	7 Amount (\$)  \$750.00
--------------------------	--	-------------------------------

8 Purpose of payment (See instructions regarding type of information required.) Contract Labor  (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date  04/09/2009	Payee name Worley Printing  Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722	Amount (\$)  \$284.70
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Printing expense  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date  04/20/2009	Payee name Wufoo  Payee address; City; State; Zip Code 16057 Tampa Palms Blvd West Tampa, FL 33647	Amount (\$)  \$24.95
------------------------	---	----------------------------

Purpose of payment (See instructions regarding type of information required.) Internet  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

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

Purpose of payment (See instructions regarding type of information required.)  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**Bill Spelman**

**SCHEDULE V – attach to form C/OH**

**PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF**

**Reference 2-2-14, Austin City Code**

Enter the name and address of any person who as solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

Name of person soliciting

contributions: David Armbrust

Address: Armbrust & Brown, LLP, 100 Congress Avenue, Suite 1300, Austin, TX 78701

Name of person soliciting

contributions: Nikelle Meade

Address: Brown McCarroll, LLP, 111 Congress Avenue, Suite 1400, Austin, TX 78701

Name of person soliciting

contributions: H.R. "Mickey" Bentley

Address: 7004 Bent Oak Circle, Austin, TX 78749

FORM COR-C/OH

# CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT # 00121212		2 Total pages filed: 10		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR FIRST MI William		Date Received	
		NICKNAME LAST SUFFIX Bill Spelman		AUSTIN CITY CLERK RECEIVED JUL 13 PM 4	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Date Hand-delivered or Postmarked	
5 ORIGINAL PERIOD COVERED		Month Day Year    THROUGH    Month Day Year 04 / 30 / 2009    07 / 15 / 2009		Receipt # Amount	
				Date Processed	
				Date Imaged	

- 6 EXPLANATION OF CORRECTION
1. Update period covering from 04/30/09-07/15/09 to 04/30/2009-06/30/2009
  2. Update expenditures under \$50
  3. Update expenditures total
  4. Update maintained contribution balance
  5. Detailed description of the following expenditures:  
a) Brent Adair, b) Alan Pogue, c) Another Option Productions
  6. Add the following expenditures:  
a) 5/20/09 - Wufoo, b) 6/19/09 - Wufoo
  7. Edit vendor expenditures  
a) 5/1/09 changed from Barksdale English to USPS  
b) 5/9/09 changed from Barksdale English to USPS  
c) 6/3/09 changed from Mark Yznaga to Office Max  
d) 6/3/09 changed from Mark Yznaga to J Blacks Feel Good Lounge

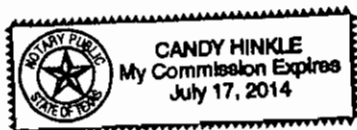
## 7 AFFIDAVIT

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

Check ONLY if applicable:



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 W. Spelman this the 13th day of July

2011 to certify which witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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

# 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) 00121212	2 Total pages filed: 1 of 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William	OFFICE USE ONLY Date Received  Date Hand-delivered or Postmarked  Receipt # Amount  Date Processed  Date Imaged	
	NICKNAME LAST SUFFIX Bill Spelman		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 13534 Austin, TX 78711		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 974.2256		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI David		
	NICKNAME LAST SUFFIX Anderson		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1515 Oxford Ave. Austin, TX 78704		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 924.2393		
9 REPORT TYPE	<input 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 checked="" 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)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 04 / 30 / 09    06 / 30 / 09		
11 ELECTION	ELECTION DATE Month Day Year 05 / 09 / 2009		
	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) Council Member, Place 5		13 OFFICE SOUGHT (if known)
14 NOTICE OF 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		
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****15 C/OH NAME** Spelman, William**16 ACCOUNT #** (Ethics Commission Filers)  
00121212**17 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

• This box is for notice of political contributions accepted or political expenditures made 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**☐ additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

**18 CONTRIBUTION  
TOTALS**

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

\$ 0

2. **TOTAL POLITICAL CONTRIBUTIONS**  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 2,515.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 49.90

4. **TOTAL POLITICAL EXPENDITURES**

\$ 11,276.72

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 21,854.89

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

**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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath\_\_\_\_\_  
Printed name of officer administering oath\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/9	
2 FILER NAME Spelman, William (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00121212	
4 Date  05/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Agarawal, Vandana (Mr.)  6 Contributor address; City; State; Zip Code 10710 Oak View Dr Austin, TX 78759	7 Amount of contribution (\$)  \$25.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bandi, Mr and Ms Upendra (Mr. and Ms)  Contributor address; City; State; Zip Code 7404 Carissa Cove Austin, TX 78759	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) self employed	
Date  05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dasgupta, Sumit (Mr.)  Contributor address; City; State; Zip Code 8900 Bluegrass Dr Austin, TX 78759	Amount of contribution (\$)  \$40.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guntakala, Chandra (Mr.)  Contributor address; City; State; Zip Code 12405 Alarr Apt 1528 Austin, TX 78727	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kalluri, Ramesh and Shanti (Mr. and Ms)  Contributor address; City; State; Zip Code 1907 Bywater Dr Houston, TX 77077	Amount of contribution (\$)  \$700.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) self employed	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/9

2 FILER NAME Spelman, William (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date

05/05/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Paturu, Karunakara and Vanajakshi (Mr. and Ms)6 Contributor address; City; State; Zip Code  
P.O. Box 203128  
Austin, TX 787207 Amount of  
contribution (\$)

\$700.00

8 In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)  
physician10 Employer (See Instructions)  
self employed

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reddi, Udaya Bhasker (Mr.)Contributor address; City; State; Zip Code  
10505 Yucca Dr  
Austin, TX 78759Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Reddy, Shanker (Mr.)Contributor address; City; State; Zip Code  
Austin, TXAmount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Thrower, Allen Ron (Mr.)Contributor address; City; State; Zip Code  
13304 View Ridgo Ct  
Austin, TX 78737Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:  
Schedule: 1/5 Report: 5/9

2 FILER NAME Spelman, William

3 ACCOUNT # (Ethics Commission filers)  
00121212

4 Date  05/09/2009	5 Payee name Adair, Brent  6 Payee address; City; State; Zip Code 4707 Avenue H Austin, TX 78751	7 Amount (\$)  \$150.00
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8 Purpose of payment (See instructions regarding type of information required.) Event expense-Music entertainment  (If travel outside of Texas, complete Schedule T)	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
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Date  05/05/2009	Payee name Another Option Productions  Payee address; City; State; Zip Code 1104 East 11th Street Austin, TX 78702	Amount (\$)  \$400.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Event expense-Town Hall food & meeting space rent (If travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
--	---

Date  06/30/2009	Payee name Bandi, Upendra  Payee address; City; State; Zip Code 7404 Carissa Cove Austin, TX 78759	Amount (\$)  \$388.33
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.) contribution return  (If travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
---	---

Date  05/04/2009	Payee name Davis, Ian  Payee address; City; State; Zip Code 600 Bouldin Ave. Austin, TX 78704	Amount (\$)  \$750.00
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.) Campaign Management  (If travel outside of Texas, complete Schedule T)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
---	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 2/5 Report: 6/9

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  05/10/2009	<b>5</b> Payee name Davis, Ian  <b>6</b> Payee address; City; State; Zip Code 600 Bouldin Avenue Austin, TX 78704	<b>7</b> Amount (\$)  \$750.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Management  (If travel outside of Texas, complete Schedule T)	<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  05/18/2009	Payee name Davis, Ian  Payee address; City; State; Zip Code 600 Bouldin Avenue Austin, TX 78704	Amount (\$)  \$2,250.00
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Purpose of payment (See instructions regarding type of information required.) Campaign Management  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  06/09/2009	Payee name Ellerby, Sharon  Payee address; City; State; Zip Code 600 Bouldin Ave. Austin, TX 78704	Amount (\$)  \$200.00
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Purpose of payment (See instructions regarding type of information required.) Contract Labor  (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date  05/01/2009	Payee name USPS  Payee address; City; State; Zip Code 510 Guadalupe Street Austin, TX 78701	Amount (\$)  \$22.68
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Purpose of payment (See instructions regarding type of information required.) Postage expense-stamp reimbursement to Barksdale English (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES****SCHEDULE F****The Instruction Guide explains how to complete this form.****1** Total pages Schedule F:  
Schedule: 3/5 Report: 7/9**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date	<b>5</b> Payee name	<b>7</b> Amount (\$)
05/09/2009	USPS  ..... <b>6</b> Payee address; City; State; Zip Code 510 Guadalupe Street Austin, TX 78701	\$157.68

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Postage expense-stamp reimbursement to Barksdale English (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
05/09/2009	Joe's Bar and Grill  ..... Payee address; City; State; Zip Code 506 West Avenue Austin, TX 78701	\$500.00

Purpose of payment (See instructions regarding type of information required.) Election Night Party (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
06/30/2009	Kalluri, Ramesh  ..... Payee address; City; State; Zip Code 1907 Bywater Dr. Houston, TX 77077	\$388.33

Purpose of payment (See instructions regarding type of information required.) contribution return (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
06/30/2009	Paturu, Klarunakara  ..... Payee address; City; State; Zip Code PO Box 203128 Austin, TX 78720	\$388.33

Purpose of payment (See instructions regarding type of information required.) contribution return (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 4/5 Report: 8/9**2** FILER NAME Spelman, William**3** ACCOUNT # (Ethics Commission filers)  
00121212

<b>4</b> Date  05/02/2009	<b>5</b> Payee name Pogue, Alan  <b>6</b> Payee address; City; State; Zip Code 2104 East MLK Blvd Austin, TX 78702	<b>7</b> Amount (\$)  \$108.25
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Event expense-photographs  (If travel outside of Texas, complete Schedule T)	<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date  06/09/2009	Payee name Pugh, Alex  Payee address; City; State; Zip Code 600 Bouldin Ave Austin, TX 78704	Amount (\$)  \$200.00
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Purpose of payment (See instructions regarding type of information required.) Contract Labor  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date  05/01/2009	Payee name Villager Newspaper  Payee address; City; State; Zip Code 1223 Rosewood Austin, TX 78702	Amount (\$)  \$240.00
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Purpose of payment (See instructions regarding type of information required.) Advertisement  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date  05/17/2009	Payee name Yznaga, Mark  Payee address; City; State; Zip Code 2401 Brairgrove Austin, TX 78704	Amount (\$)  \$4,000.00
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Purpose of payment (See instructions regarding type of information required.) consulting  (If travel outside of Texas, complete Schedule T)	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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# POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F:  
Schedule: 5/5 Report: 9/9

**2** FILER NAME Spelman, William

**3** ACCOUNT # (Ethics Commission filers)  
00121212

4 Date	5 Payee name	7 Amount (\$)
06/03/2009	Office Max  ..... <b>6</b> Payee address; City: State: Zip Code 907 W 5th St. Austin, TX 78703	\$158.22

**8** Purpose of payment (See instructions regarding type of information required.)  
Office overhead expense-office supplies reimbursement to Mark Yznaga  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
06/03/2009	J Blacks Feel Good Lounge  ..... Payee address; City: State: Zip Code 710 B W 6th St Austin, TX 78701-2708	\$175.00

Purpose of payment (See instructions regarding type of information required.)  
Event expense-reimbursement to Mark Yznaga for food & beverage  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
05/20/2009	Wufoo  ..... Payee address; City: State: Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	\$24.95

Purpose of payment (See instructions regarding type of information required.)  
Internet fees  
(If travel outside of Texas, complete Schedule T)

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

Date	Payee name	Amount (\$)
06/19/2009	Wufoo  ..... Payee address; City: State: Zip Code 16057 Tampa Palms Blvd. West Tampa, FL 33647	\$24.95

Purpose of payment (See instructions regarding type of information required.)  
Internet fees  
(If travel outside of Texas, complete Schedule T)

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

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