INDIVIDUALS

edditional pages

Address/PO Box;

Apt. / Suite #:

City:

State:

Zip Code

GO TO PAGE 2

Electronic Filing Version

Texas Ethics Commission	P.O. Box 120	7,000,00,00,00,00	(512)463-5800	1-800-325-8506				
CANDIDATE SUPPORT &		OLDER REPORT:		FORM C/OH SHEET PG 2				
14 C/OH NAME Brown	n, Peter (Mr.)		15 ACCOUNT # 00000001	(Ethics Commission filers)				
16 NOTICE FROM POLITICAL COMMITTEE(S)	have been made with	otice of political expenditures by political committees to sur nout the candidate's or officeholder's knowledge or conser by receive notice of such expenditures COMMITTEE NAME	pport the candidate / officeholder. nt. Candidates and officeholders ar	These expenditures may e required to report this				
	GENERAL.	COMMITTEE ADDRESS						
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME						
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS						
17 CONTRIBUTION TOTALS	1. TOTAL P PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER S, LOANS, OR GUARANTEES OF LOANS), UNLESS IT	R THAN SEMIZED \$	0.00				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN	NS) \$	0.00				
EXPENDITURE TOTALS	3. TOTAL P	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS	\$	778.90				
	4. TOTAL F	POLITICAL EXPENDITURES	\$	22,364.70				
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LY OF THE REPORTING PERIOD	\$	34,145.66				
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS Y OF THE REPORTING PERIOD	S OF THE \$	0.00				
18 AFFIDAVIT	111		•					
MATHEW A ZEIS MY COMMISSION EXPIRES August 16, 2009 August 16, 2009 August 16, 2009 I swoer, 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.								
AFFIX NOTARY S	STAMP / SEAL ABOVI		ature of Candidate or Officeho	der				
Sworn to and subscribe	a c	ne said Peter Brown tify which, witness my hand and seal of office	, this the	[6 day				
Matty G. Signature of officer admir	ر کے	Mathew A. Zeis Print name of officer administering oath	Notary	nistering oath				

POLITI	POLITICAL EXPENDITURES					1-800-325-8506	
The Instruction	ON GUIDE explains how to comp	plete this form.		1 PAGE # Schedule: 1/2	7 Repo	ort: 3/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT # 00000001	(Ethics C	Commission filers)	
4 Date	5 Payee name A & E Products Co. LP		, , , , , , , , , , , , , , , , , , , ,		7	Amount (\$)	
07/10/2006	6 Payee address; C PO Box 27286 Houston, TX 77227	City; State; Zip Code				\$229.11	
8 Purpose of pay (See instruction Printing	yment ins regarding type of information	required.)	9 * Complete if direct Candidate / Officehol		L efit Cand	idate/Officeholder **	
Payment fo	or travel outside Texas (complete	e boxes 10-16)	Office sought: Office held:				
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ional pages if necess	агу)		
11 Departure city / location 12 Departure date 13 Destination city / location						14 Arrival date	
15 Means of trans	portation		16 Purpose of travel				
4 Date	5 Payee name A & E Products Co. LP				7	Amount (\$)	
07/10/2006	6 Payee address; C PO Box 27286 Houston, TX 77227	City; State; Zip Code				\$162.38	
8 Purpose of pay (See instruction Printing	yment ns regarding type of information i	required.)	9 · · Complete if direct Candidate / Officehold		fit Cand	idate/Officeholder **	
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office sought: Office held:			٠.,	
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel v	was made (attach additi	onal pages if necess	ary)		
11 Departure city /	location	12 Departure date	13 Destination city / lo	ocation		14 Arrival date	
15 Means of transportation			16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES (512					1-800-325-8506		
The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE # Schedule: 2/27 Report: 4/29				
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00000001				
4 Date	5 Payee name A & E Products Co. LP				7 Amount (\$)			
09/12/2006	6 Payee address; (PO Box 27286 Houston, TX 77227	City; State; Zip Code				\$138.56		
8 Purpose of pay (See instruction Printing	yment ns regarding type of information	required.)	9 ** Complete if direc Candidate / Officehol	t expenditure to bene der name:	Iefit Cand	idate/Officeholder		
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:					
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)								
11 Departure city i	location	13 Destination city / l	ocation		14 Arrival date			
15 Means of trans	portation		16 Purpose of travel					
4 Date	5 Payee name A Taste of Catering				7	Amount (\$)		
09/13/2006	6 Payee address; C 7005 Camway Houston; TX 77009	ity; State; Zip Code				\$902.93		
8 Purpose of pay (See instruction Event Expens	ns regarding type of information	required.)	9 · · Complete if direct Candidate / Officehole		fit Candi	date/Officeholder ***		
☐ Bournout fo	r travel outside Texas (complete	have 40.40)	Office sought:					
	n(s) traveling on whose behalf th	<u> </u>		onal pages if necess	ary)			
11 Departure city /	location	13 Destination city / tocation 14 Arrivat da			14 Arrival date			
15 Means of transportation			16 Purpose of travel					

Texas Ethics Con	nmission P.O.Box 1207	O Austin, Texas	78711-2070		(512)46	3-5800	1-800-325-8500
POLITI	CAL EXPENDIT	TURES			-	S	CHEDULE F
The Instruction	ON GUIDE explains how to comp	olete this form.		1	PAGE # Schedule: 3/2	7 Repo	ort: 5/29
2 FILER NAME	Brown, Peter (Mr.)			3	ACCOUNT # 00000001	(Ethics C	Commission filers)
4 Date	5 Payee name Acres Homes Citizens (Chamber		<u>. </u>		7	Amount (\$)
07/17/2006					\$125.00		
(See instruction	8 Purpose of payment (See instructions regarding type of information required.) Sponsorships				penditure to ben name:	efit Cand	lidate/Officeholder **
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:				
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)							
11 Departure city / location			tion .	•••	14 Arrival date		
15 Means of trans	portation		16 Purpose of travel				I
4 Date	5 Payee name Advarion Inc.					7	Amount (\$)
09/20/2006	6 Payee address; C PO Box 540183 Houston, TX 77254			•••	,		\$2,587.20
8 Purpose of pay (See instructio Web & intern	ns regarding type of information	required.)	9 ** Complete if direct Candidate / Officehol	t exp	penditure to beni name:	efit Cand	iidate/Officeholder **
П р			Office sought:				
	or travel outside Texas (complete	<u> </u>	Office held: was made (attach additi	iona	pages if neces:	sary)	
11 Departure city	/ location	12 Departure date	13 Destination city / I	ocat	lon		14 Arrival date
4E M			40.5				
15 Means of trans	portation .		16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES					CHEDULE F
The Instruction	ION GUIDE explains how to comp	plete this form.		1 PAGE # Schedule: 4/2	7 Repo	ort: 6/29
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT # 00000001		commission filers)
4 Date	5 Payee name Advarion Inc.			<u> </u>	7	Amount (\$)
09/20/2006	6 Payee address; C PO Box 540183 Houston, TX 77254	City; State; Zlp Code	• • • • • • • • • • • • • • • • • • • •			\$1,800.00
8 Purpose of pay (See instruction Web & intern	ons regarding type of information i	required.)	9 ** Complete if direc Candidate / Officehol		efit Candi	idate/Officeholder
			Office sought: Office held:			
10 Name of perso	on(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	tional pages if neces	sary)	
11 Departure city / location 12 Departure date 13 Destination city / location						14 Arrival date
15 Means of trans	portation		16 Purpose of travel			<u></u>
4 Date	5 Payee name Advarion Inc.				7	Amount (\$)
09/20/2006	6 Payee address; C PO Box 540183 Houston, TX 77254	City; State; Zip Code				\$270.63
8 Purpose of pay (See instructio Web & intern	ons regarding type of information	required.)	9 · · Complete if direct Candidate / Officehol	t expenditure to bene lder name:	<u>I</u> efit Candi	idate/Officeholder **
	Town tananah		Office sought: Office held:			
	or travel outside Texas (complete	•		ional pages if necess	sary)	
11 Departure city	/ location	12 Departure date	13 Destination city / I	location		14 Arrival date
			-			
15 Means of trans	portation		16 Purpose of travel			

POLITI	POLITICAL EXPENDITURES					S	CHEDULE F
The Instruction	ON GUIDE explains how to comp	plete this form.		1	PAGE # Schedule: 5/2	27 Rep	ort: 7/29
2 FILER NAME	Brown, Peter (Mr.)			3	ACCOUNT # 00000001		Commission filers)
4 Date	5 Payee name Advarion Inc.		· · · · · · · · · · · · · · · · · · ·	I	· · · · · · · · · · · · · · · · · · ·	7	Amount (\$)
09/20/2006	6 Payee address; C PO Box 540183 Houston, TX 77254	City; State; Zip Code		••			\$750.00
8 Purpose of par (See instruction Web & interm	ns regarding type of information	required.)	9 · · Complete if direc Candidate / Officehol			efit Cano	lidate/Officeholder **
			Office sought:				
	or travel outside Texas (complete		Office held:				
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	iona	I pages if neces	sary)	
11 Departure city / location 12 Departure date 13 Destination city / location					14 Arrival date		
15 Means of trans	16 Purpose of travel				<u> </u>		
4 Date	5 Payee name Advarion Inc.		<u> </u>		· · · · · · · · · · · · · · · · · · ·	7	Amount (\$)
09/20/2006	6 Payee address; C PO Box 540183 Houston, TX 77254	city; State; Zip Code					\$500.00
8 Purpose of pay (See instruction Web & internal	ns regarding type of information	required.)	9 · · Complete if direct Candidate / Officehol			efit Cano	lidate/Officeholder **.
			Office sought:				
	or travel outside Texas (complete	<u> </u>	Office held:				
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ona	pages if neces	sary)	
11 Departure city / location 12 Departure date 13 Destination city / location 14 Arrival dat					14 Arrival date		
15 Means of transportation			16 Purpose of travel				·

Texas Etnics Con	as Etnics Commission P.O.Box 12070 Austin, Texas 78711-2070			(512)46	<u>3-5800</u>	1-800-325-8506
POLITI	CAL EXPENDIT	URES			S	CHEDULE F
The Instruction	ON GUIDE explains how to comp	plete this form.		1 PAGE # Schedule: 6/2	7 Repo	ort: 8/29
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics C	Commission filers)
4 Date	5 Payee name AT&T			· ·	7	Amount (\$)
07/12/2006		City; State; Zip Code				\$269.77
8 Purpose of pa (See instruction Telephone	(See instructions regarding type of information required.)			t expenditure to beni lder name:	L efit Cand	lidate/Officeholder
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:			
10 Name of perso	n(s) traveling on whose behalf th	ne expenditure for travel	was made (attach addit	ional pages if neces	sary)	
11 Departure city / location 12 Departure date			13 Destination city /	ocation .		14 Arrival date
15 Means of trans	sportation		16 Purpose of travel			
4 Date	5 Payee name AT&T				7	Amount (\$)
08/14/2006	6 Payee address; C PO Box 3025 Houston, TX 77057	City; State; Zip Code				\$298.15
8 Purpose of pa (See instruction Telephone	yment ons regarding type of information	required.)	9 * Complete if direct Candidate / Officeho	t expenditure to bend der name:	efit Cand	idate/Officeholder
			Office sought:	· .		
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office held:			
10 Name of perso	n(s) traveling on whose behalf the	ne expenditure for travel	was made (attach addit	ional pages if necess	sary)	
11 Departure city	/ location	12 Departure date	13 Destination city /	ocation		14 Arrival date
15 Means of trans	sportation	<u> </u>	16 Purpose of travel			<u> </u>
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POLITI	POLITICAL EXPENDITURES				SC	CHEDULE F	
The Instruction	ION GUIDE explains how to comp	olete this form.		1 PAGE # Schedule: 7/2	7 Repor	t: 9/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics Co	mmission filers)	
4 Date	5 Payee name AT&T		,		7	Amount (\$)	
08/30/2006 6 Payee address; City; State; Zip Code PO Box 3025 Houston, TX 77057				•••••	i i	\$274.37	
8 Purpose of pa (See instruction Telephone	yment ons regarding type of information	required.)	9 * * Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candid	late/Officeholder **	
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:				
10 Name of perso	on(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ional pages if necess	sary)		
11 Departure city / location 12 Departure date			13 Destination city / k	ocation		14 Arrival date	
15 Means of trans	portation		16 Purpose of travel				
4 Date	5 Payee name AT&T				7 Amount (\$)		
10/03/2006	6 Payee address; C PO Box 3025 Houston, TX 77057	City; State; Zip Code				\$270.56	
8 Purpose of pay (See instruction Telephone	yrnent ons regarding type of information	required.)	9 · · Complete if direct Candidate / Officehol		efit Candid	late/Officeholder **	
☐ Payment fo	or travel outside Texas (complete	a haves 10.16)	Office sought: Office held:				
	on(s) traveling on whose behalf th		<u></u>	onal pages if necess	ary)		
11 Departure city	/ location	12 Departure date	13 Destination city / location			14 Arrival date	
15 Means of trans	portation		16 Purpose of travel		<u></u>		
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POLITI		S	CHEDULE F				
The INSTRUCTION	อง Guide explains how to comp	lete this form.		1 PAGE# Schedule: 8/2	7 Repo	rt: 10/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT # 00000001	(Ethics C	ommission filers)	
4 Date	5 Payee name AT&T			<u> </u>	7	Amount (\$)	
10/31/2006	6 Payee address; C PO Box 3025 Houston, TX 77057	rity; State; Zip Code	•••••••			\$273.18	
8 Purpose of pay (See instruction Telephone	ment ns regarding type of information	required.)	9 · · Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candi	idate/Officeholder	
	•		Office sought:				
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office held:				
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ional pages if necess	sary)		
11 Departure city	location	12 Departure date	13 Destination city / l	ocation		14 Arrival date	
15 Means of trans	portation		16 Purpose of travel				
4 Date	5 Payee name AT&T				7 Amount (\$)		
12/04/2006	6 Payee address; C PO Box 3025 Houston, TX 77057	ity; State; Zip Code	-			\$270.43	
8 Purpose of pay (See instruction Telephone	ment ns regarding type of information	required.)	9 · · Complete if direct Candidate / Officehol		l efit Candi	date/Officeholder ••	
			Office sought:				
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office held:				
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel v	was made (attach additi	ional pages if necess	sary)		
11 Departure city /	location	12 Departure date	13 Destination city / le	ocation		14 Arrival date	
15 Means of transportation			16 Purpose of travel				
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POLITI	CAL EXPENDIT	(512)46	3-3800 1-800-325-8506 SCHEDULE F				
The Instruction	он Guide explains how to comp	elete this form.		1 PAGE # Schedule: 9/27 Report: 11/29			
2 FILER NAME	Brown, Peter (Mr.)	· · · · · · · · · · · · · · · · · · ·		3 ACCOUNT # (Ethics Commission filers) 00000001			
4 Date	5 Payee name Bacon's Multivision		,	,,	7 Amount (\$)		
08/29/2006	6 Payee address; C 66 Franklin St. 3rd Floor Oakland, CA 94607	City; State; Zip Code			\$477.38		
8 Purpose of payment (See instructions regarding type of information required.) TV Production Expenses			9 · · Complete if direc Candidate / Officehol		efit Candidate/Officeholder **		
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office sought:	·			
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	ional pages if necess	sary)		
11 Departure city / location 12 Departure date 13 Des				ocation	14 Arrival date		
15 Means of trans	portation		16 Purpose of travel		<u> </u>		
4 Date	5 Payee name Bob Casey for Pennsylv	rania Committee	· · · · · · · · · · · · · · · · · · ·		7 Amount (\$)		
09/20/2006	6 Payee address; C 420 C Street NE Washington, DC 20002	ity; State; Zip Code			\$250.00		
8 Purpose of pay (See instruction Sponsorships	ns regarding type of information	required.)	9 * Complete if direct Candidate / Officehol		 efit Candidate/Officeholder		
C Provencet for	or travel outside Texas (complete	haves 40 46)	Office sought: Office held:				
	n(s) traveling on whose behalf th		<u> </u>	ional pages if necess	sary)		
11 Departure city /	location	12 Departure date	13 Destination city / I	14 Arrival date			
15 Means of transportation			16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES				(512)4	63-5800 S	1-800-325-8500
The Instruction	ON GUIDE explains how to comp	olete this form.		1	PAGE # Schedule: 10)/27 Rej	port: 12/29
2 FILER NAME	Brown, Peter (Mr.)			3	ACCOUNT # 00000001	(Ethics C	Commission filers)
4 Date	5 Payee name Chargois, Evmia					7	Amount (\$)
09/01/2006		City; State; Zip Code					\$640.00
8 Purpose of pay (See Instruction Contract Lab	ns regarding type of information	required.)	9 · · Complete if direc Candidate / Officehol	t exp Ider	enditure to bei name:	nefit Cano	lidate/Officeholder **
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:		÷		
10 Name of perso	en(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ional	pages if neces	ssary)	
11 Departure city / location 12 Departure date 13 Destination city / location					14 Arrival date		
15 Means of transportation 16 Purp							<u> </u>
4 Date	5 Payee пате Cingular Wireless					7	Armount (\$)
07/25/2006	6 Payee address; C PO Box 650574 Dallas, TX 75625-0574	City; State; Zip Code					\$153.74
8 Purpose of pay (See instruction Telephone	yment ins regarding type of information	required.)	9 ** Complete if direct Candidate / Officehol			nefit Cand	ildate/Officeholder **
☐ Payment fo	or travel outside Texas (complete	a boxes 10-16)	Office sought: Office held:				
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	ional	pages if neces	sary)	
11 Departure city	/ location	12 Departure date	13 Destination city / location 14 Arrival of			14 Arrival date	
15 Means of trans	portation		16 Purpose of travel				
			<u>, I</u>				

POLITICAL EXPENDIT	POLITICAL EXPENDITURES					\$	CHEDULE F
The INSTRUCTION GUIDE explains how to comp	plete this form.		1	PAGE # Schedule	e: 11	/27 Rep	port: 13/29
2 FILER NAME Brown, Peter (Mr.)			3	ACCOUN 0000000		(Ethics C	Commission filers)
4 Date 5 Payee name Ezzell, Catherine						7	Amount (\$)
09/11/2006 6 Payee address;	City; State; Zip Code				•••		\$112.00
Purpose of payment (See instructions regarding type of information Contract Labor	required.)	9 · · Complete if direc Candidate / Officeho			ben	efit Cand	lidate/Officeholder **
Payment for travel outside Texas (complete	Office sought: Office held:						
10 Name of person(s) traveling on whose behalf the	he expenditure for travel	was made (attach addit	iona	ıl pages if n	eces	sary)	
11 Departure city / location	12 Departure date	e 13 Destination city / location					14 Arrival date
15 Means of transportation	J	16 Purpose of travel					
4 Date 5 Payee name Ezzell, Ellie			•			7	Amount (\$)
08/07/2006 6 Payee address; 6026 Vicki John Houston, TX 77096	City; State; Zip Code						\$63.42
Purpose of payment (See instructions regarding type of information Headquarters	required.)	9 ** Complete if direc Candidate / Officeho			ben	.Iefit Cand	lidate/Officeholder **
☐ Payment for travel outside Texas (complete	e boxes 10-16)	Office sought: Office held:					
10 Name of person(s) traveling on whose behalf the	ne expenditure for travel	was made (attach addit	iona	I pages if n	eces	sary)	
11 Departure city / location	12 Departure date	13 Destination city / 1	loca	tion			14 Arrival date
15 Means of transportation	16 Purpose of travel						
		I					

	POLITICAL EXPENDITURES						CHEDULE F
	The Instruction	DN GuidE explains how to comp	lete this form.		1 PAGE# Schedule: 12/	27 Rep	ort: 14/29
, , ,					3 ACCOUNT # 00000001	(Ethics C	ommission filers)
4	Date 5 Payee name Faith Flowers					7	Amount (\$)
08/02/2006 6 Payee address; City; State; Zip Code 14010 S. Post Oak Rd. Suite 1102 Houston, TX 77045						\$124.10	
Purpose of payment (See instructions regarding type of information required.) Field				9 * Complete if direct expenditure to benefit Candidate/Officeholder * Candidate / Officeholder name:			
Payment for travel outside Texas (complete boxes 10-16)				Office sought: Office held:			
10		n(s) traveling on whose behalf th		l was made (attach additi	ional pages if necess	sary)	
11 Departure city / location 12 Departure date 13 Destination city / location				ocation		14 Arrival date	
15	15 Means of transportation			16 Purpose of travel			
4	Date	5 Payee name Galveston Bay Foundati	ion	7 Amount (\$)			
	08/09/2006	6 Payee address; C 17324-A Highway 3 Webster, TX 77598	ity; State; Zip Code				\$2,500.00
8		ins regarding type of information	required.)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:			idate/Officeholder **
	Payment fo	or travel outside Texas (complete	boxes 10-16)	Office sought: Office held:			
10	Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	Mas made (attach addit	ional pages if necess	sary)	· · · · · · · · · · · · · · · · · · ·
11 Departure city / location 12 Departure date				13 Destination city / I	ocation		14 Arrival date
15 Means of transportation			16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES				S(CHEDULE F	
The Instruction	ON GUIDE explains how to comp	lete this form.		1 PAGE# Schedule: 13/	27 Rep	ort: 15/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics C	ommission filers)	
4 Date	5 Payee name Gene Green Congression	onal Campaign			7	Amount (\$)	
08/09/2006 6 Payee address; City; State; Zip Code P.O. Box 16128 Houston, TX 77222-6128					\$100.00		
8 Purpose of par (See instruction Sponsorships	ns regarding type of information	9 ** Complete if direc Candidate / Officeho	t expenditure to bene lder name:	efit Cand	idate/Officeholder **		
Payment for travel outside Texas (complete boxes 10-16)			Office held:				
10 Name of perso	10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)						
11 Departure city / location 12 Departure date			13 Destination city /	location		14 Arrival date	
15 Means of trans	sportation	I	16 Purpose of travel				
4 Date	5 Payee name Griffin, Kathryn		<u> </u>		7	Amount (\$)	
08/09/2006	6 Payee address; C 3911 Main St. Houston, TX 77002	City; State; Zip Code				\$450.00 ·	
8 Purpose of pa (See instruction Contract Lab	ns regarding type of information	required.)	9 ** Complete if direct Candidate / Officeho		I efit Cand	idate/Officeholder **	
Payment fo	or travet outside Texas (complete	a boxes 10-16)	Office sought:				
· · · · · · · · · · · · · · · · · · ·	on(s) traveling on whose behalf the		was made (attach addit	tional pages if necess	sary)		
11 Departure city	/ location	12 Departure date	13 Destination city /	location		14 Antival date	
15 Means of transportation			16 Purpose of travel			L	
						<u> </u>	

POLITICAL EXPENDITURES						CHEDULE F	
The Instruction	วง Guide explains how to comp	lete this form.		1 PAGE# Schedule: 14/2	27 Repo	ort: 16/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics Co	ommission filers)	
4 Date 5 Payee name Harris County Tejano Democrats					7	Amount (\$)	
08/09/2006	6 Payee address; C 3715 North Main St. Houston, TX 77009				\$250.00		
8 Purpose of pay (See instruction Sponsorships	ns regarding type of information	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought:					
Payment for travel outside Texas (complete boxes 10-16)			Office held:				
10 Name of perso	10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)						
11 Departure city / location 12 Departure date 13 Destina			13 Destination city / !	ocation		14 Arrival date	
15 Means of trans	portation		16 Purpose of travel	7 Amount			
4 Date	5 Payee name Johnson, Kaleta	<u> </u>	<u> </u>	-	7	Amount (\$)	
08/07/2006	6 Payee address; C 2933 Del Monte Dr. Houston, TX 77019	ity; State; Zip Code				\$192.70	
8 Purpose of pa (See instruction Lunch for Vo	ns regarding type of information	required.)	9 ** Complete if direc Candidate / Officehot		efit Candi	date/Officeholder **	
☐ Payment fo	or travel outside Texas (complete	s boxes 10-16)	Office sought: Office held:				
	n(s) traveling on whose behalf th		was made (attach addit	ional pages if necess	sary)		
11 Departure city / location 12 Departure date			13 Destination city /	ocation		14 Arrival date	
15 Means of trans	portation		16 Purpose of travel				

POLITICAL EXPENDIT	POLITICAL EXPENDITURES						
The Instruction Guide explains how to comp	lete this form.		1 PAGE# Schedule: 15/	27 Report: 17/29			
2 FILER NAME Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)			
4 Date 5 Payee name Johnson, Kaleta				7 Amount (\$)			
09/11/2006 6 Payee address; C 2933 Del Monte Dr. Houston, TX 77019	,		\$89.51				
Purpose of payment (See instructions regarding type of information Contract Labor	required.)	9 * Complete if direct expenditure to benefit Candidate/Officeholder Candidate / Officeholder name: Office sought:					
Payment for travel outside Texas (complete	Office held:						
10 Name of person(s) traveling on whose behalf th	10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)						
11 Departure city / location 12 Departure date 13 Destination city / location				14 Arrival date			
15 Means of transportation		16 Purpose of travel					
4 Date 5 Payee name Lone Star Strategies				7 Amount (\$)			
07/13/2006 6 Payee address; C 7670 Woodway Suite 110 Houston, TX 77063	ity; State; Zip Code			\$200.00			
Purpose of payment (See instructions regarding type of information Compliance	required.)	9 · · Complete if direc Candidate / Officehol		fit Candidate/Officeholder			
Payment for travel outside Texas (complete	haven 10 16)	Office sought: Office held:					
10 Name of person(s) traveling on whose behalf th			ional pages if necess	eary)			
11 Departure city / location	12 Departure date	13 Destination city / I	ocation	14 Arrival date			
15 Means of transportation	16 Purpose of travel						

POLITI	POLITICAL EXPENDITURES					CHEDULE F		
The Instruction	อง Guide explains how to comp	lete this form.		1 PAGE # Schedule: 16/27 Report: 18/29				
2 FILER NAME Brown, Peter (Mr.)				3 ACCOUNT # 00000001	(Ethics C	ommission filers)		
4 Date 5 Payee name Lone Star Strategies					7	Amount (\$)		
07/13/2006 6 Payee address; City; State; Zip Code 7670 Woodway Suite 110 Houston, TX 77063			• • • • • • • • • • • • • • • • • • • •	************		\$200.00		
8 Purpose of pay (See instruction Compliance	ment ns regarding type of information	required.)	9 ** Complete if direct Candidate / Officehol		fit Cand	idate/Officeholder **		
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:					
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	onal pages if necess	ary)			
11 Departure city / location 12 Departure date			13 Destination city / le	ocation		14 Arrival date		
15 Means of trans	portation		16 Purpose of travel					
4 Date	5 Payee name Lone Star Strategies				7	Amount (\$)		
07/13/2006	6 Payee address; C 7670 Woodway Suite 110 Houston, TX 77063	ity; State; Zip Code				\$200.00		
8 Purpose of pay (See instruction Compliance	ment ns regarding type of information	required.)	9 ** Complete if direct Candidate / Officehold		fit Cand	idate/Officeholder **		
☐ Payment fo	r travel outside Texas (complete	boxes 10-16)	Office sought: Office held:					
10 Name of person	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach additi	onal pages if necess	ary)			
11 Departure city / location 12 Departure date			13 Destination city / to	ocation		14 Arrival date		
15 Means of transportation			16 Purpose of travel					

POLITICAL EXPE	POLITICAL EXPENDITURES				
The INSTRUCTION GUIDE explains ho	w to complete this form.		1 PAGE# Schedule: 17/2	27 Report: 19/29	
2 FILER NAME Brown, Peter (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)	
4 Date 5 Payee name Lone Star Strategies				7 Amount (\$)	
09/11/2006 6 Payee address; City; State; Zip Code 7670 Woodway Suite 110 Houston, TX 77063				\$200.00	
Purpose of payment (See instructions regarding type of i Compliance	9 · · Complete if direc Candidate / Officeho		efit Candidate/Officeholder **		
Payment for travel outside Texa	Office sought: Office held:	Office held:			
10 Name of person(s) traveling on who	se behalf the expenditure for tra-	vel was made (attach addit	ional pages if necess	sary)	
11 Departure city / location	13 Destination city /	location	14 Arrival date		
15 Means of transportation	<u> </u>	16 Purpose of travel			
4 Date 5 Payee name Lone Star Str	ategies			7 Amount (\$)	
09/11/2006 6 Payee address 7670 Woodw Suite 110 Houston, TX	ау	de		. \$200.00	
Purpose of payment (See instructions regarding type of Compliance	information required.)	9 · · Complete if direct Candidate / Officeho		efit Candidate/Officeholder	
☐ Payment for travel outside Texa	is (complete boxes 10-16)	Office sought: Office held:			
10 Name of person(s) traveling on who	se behalf the expenditure for tra	vel was made (attach addit	tional pages if necess	sary)	
11 Departure city / location	12 Departure date	13 Destination city /	location	14 Arrival date	
15 Means of transportation	16 Purpose of travel		.		
		<u> </u>			

POLITICAL EXPENDITURES						CHEDULE F	
The Instruction	אס Guide explains how to comp	lete this form.		1 PAGE# Schedule: 18/	1 PAGE # Schedule: 18/27 Report: 20/29		
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethlos Co	ommission filers)	
4 Date	5 Payee name Lone Star Strategies			7	Amount (\$)		
09/11/2006 6 Payee address; City; State; Zip Code 7670 Woodway Suite 110 Houston, TX 77063			, ,			\$200.00	
8 Purpose of pa (See instruction Compliance	yment yns regarding type of information	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:					
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:				
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)							
11 Departure city / location 12 Departure date 13 Destination city / location				14 Arrival date			
15 Means of transportation			16 Purpose of travel	7 Amount			
4 Date 12/14/2006	5 Payee name Lone Star Strategies 6 Payee address; C 7670 Woodway Suite 110 Houston, TX 77063	City; State; Zip Code			7	Amount (\$) \$1,814.32	
8 Purpose of pa (See instruction Event Exper	ons regarding type of information	required.)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:				
Payment f	or travel outside Texas (complete	e boxes 10-16)	Office sought: Office held:				
10 Name of perso	on(s) traveling on whose behalf the	ne expenditure for travel	was made (attach addit	ional pages if neces	sary)		
11 Departure city	/ location	12 Departure date	13 Destination city /	location	<u>. </u>	14 Arrival date	
15 Means of transportation			16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES						
The Instruction	он Guide explains how to comp	lete this form.		1 PAGE # Schedule: 19	/27 Report: 21/29		
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)		
4 Date	5 Payee name Monarch Printing				7 Amount (\$)		
08/03/2006 6 Payee address; City; State; Zip Code 6605 McGrew Houston, TX 77087					\$591.10		
8 Purpose of pa (See instruction Printing	yment ons regarding type of information	required.)	9 ** Complete if direc Candidate / Officeho		efit Candidate/Officeholder **		
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:				
	on(s) traveling on whose behalf th	<u></u>	 was made (attach addit	lional pages if neces	sary)		
11 Departure city / location 12 Departure date 13 I			13 Destination city /	location	14 Arrival date		
15 Means of trans	15 Means of transportation				<u> </u>		
4 Date	5 Payee name Monarch Printing	*** **	·····	······	7 Amount (\$)		
08/29/2006	6 Payee address; C 6605 McGrew Houston, TX 77087	City: State; Zip Code			\$94.56		
8 Purpose of pa (See instruction Printing	yment ons regarding type of information	required.)	9 ** Complete if direct Candidate / Officeho		efit Candidate/Officeholder **		
☐ Payment fo	or travel outside Texas (complete	boxes 10-16)	Office sought: Office held:		*		
	on(s) traveling on whose behalf th		was made (attach addit	tional pages if neces	sary)		
11 Departure city	/ location	12 Departure date	13 Destination city /	location	14 Arrival date		
15 Means of trans	sportation		16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES						
The Instruction	ON Guide explains how to comp	lete this form.		1 PAGE # Schedule: 20/	27 Rep	ort: 22/29	
2 FILER NAME	Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics Co	ommission filers)	
4 Date 5 Payee name Office Max 07/13/2006 6 Payee address; City; State; Zip Code 11041 Northwest Freeway Houston, TX 77092				7	Amount (\$) \$132.03		
Office Suppli	ns regarding type of information	9 ** Complete if direc Candidate / Officehol Office sought: Office held: was made (attach addit	lder name:		date/Officeholder **		
11 Departure city / location 12 Departure date			13 Destination city / I	ocation		14 Arrival date	
15 Means of trans	15 Means of transportation			Purpose of travel 7 Amount			
4 Date 07/18/2006	5 Payee name Palace of Praise Church 6 Payee address; 21811 Prairie Spring Spring, TX 77379	n Sity; State; Zip Code			7	Amount (\$) \$75.00	
8 Purpose of payment , (See instructions regarding type of information required.) Signage Payment for travel outside Texas (complete boxes 10-16) 10 Name of person(s) traveling on whose behalf the expenditure for travel			9 * Complete if direct expenditure to benefit Candidate/Officeholder Candidate / Officeholder name: Office sought: Office held:				
11 Departure city		12 Departure date	13 Destination city /			14 Arrival date	
15 Means of transportation			16 Purpose of travel				

F	POLITICAL EXPENDITURES					S	CHEDULE F
Т	he Instruction	อง Guid∈ explains how to comp	lete this form.		1 PAGE # Schedule: 21/	27 Rep	ort: 23/29
2 FILER NAME Brown, Peter (Mr.)			3 ACCOUNT# 00000001	(Ethics C	ommission tilers)		
4 Date 5 Payee name Palace of Praise Church				7	Amount (\$)		
07/21/2006 6 Payee address; City; State; Zip Code 21811 Prairie Spring Spring, TX 77379						\$100.00	
Purpose of payment (See instructions regarding type of information required.) Printing			9 ** Complete if direc Candidate / Officehol		efit Cand	idate/Officeholder **	
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:				
10 N	10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)						
11 Departure city / location 12 Departure date 13 Destination city / location			location		14 Arrival date		
15 Means of transportation				16 Purpose of travel			
4	Date	5 Payee name Red Cat Jazz Cafe				7	Amount (\$)
07	7/17/2006	6 Payee address; C 924 Congress Houston, TX 77002	lity: State; Zip Code				\$468.57
(Purpose of pay See instruction Event Expen	ns regarding type of information	required.)	9 · · Complete if direc Candidate / Officeho		efit Cand	idate/Officeholder **
	Payment fo	or travel outside Texas (complete	a boxes 10-16)	Office sought: Office held:			
10 N	lame of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	ional pages if necess	sary)	
11 Departure city / location 12 Departure date				13 Destination city /	location		14 Arrival date
15 Means of transportation			16 Purpose of travel				

POLITI	POLITICAL EXPENDITURES						CHEDULE F
The Instruction	อง Guide explains how to comp	lete this form.		1	PAGE # Schedule: 2	2/27 Rep	oort: 24/29
2 FILER NAME	Brown, Peter (Mr.)			3	ACCOUNT # 00000001	(Ethics C	commission filers)
4 Date	Date 5 Payee name Red Cat Jazz Cafe					7	Amount (\$)
09/05/2006 6 Payee address; City; State; Zip Code 924 Congress Houston, TX 77002							\$250.00
8 Purpose of pay (See instruction Event Expen	required.)	9 * Complete if direct expenditure to benefit Candidate/Officeholder * Candidate / Officeholder name:					
_			Office sought:				
Payment fo		Office held:					
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if no					I pages if nece	ssary)	
11 Departure city / location 12 Departure date			13 Destination city / I	locat	tion		14 Arrival date
15 Means of trans	portation		16 Purpose of travel	•	******		
4 Date	5 Payee name Reliant Energy					7	Amount (\$)
08/01/2006	6 Payee address; C PO Box 650475 Dallas, TX 75265-0475	city; State; Zip Code		••••			\$200.25
8 Purpose of pa (See instruction Electricity	I yment ns regarding type of information	required.)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:				didate/Officeholder **
			Office sought:				
☐ Payment fo	or travel outside Texas (complete	boxes 10-16)	Office held:				
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	tiona	I pages if nece	essary)	
11 Departure city	/ location	12 Departure date	13 Destination city /	locat	tion	-	14 Arrival date
15 Means of trans	16 Purpose of travel						
			-				
i							

POLITI	POLITICAL EXPENDITURES					HEDULE F	
The instruction	วม Guide explains how to comp	lete this form.		1 PAGE# Schedule: 23/2	27 Repo	rt: 25/29	
2 FILER NAME Brown, Peter (Mr.)				3 ACCOUNT # 00000001	(Ethics Con	nmission filers)	
4 Date 5 Payee name Reliant Energy					7	Amount (\$)	
08/29/2006	6 Payee address; C PO Box 650475 Dallas, TX 75265-0475		,		\$373.39		
8 Purpose of pa (See instruction Electricity	yment yment sregarding type of information	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought:					
			Office sought: Office held:				
	or travel outside Texas (complete			ional pages if necess	sary)	<u></u>	
11 Departure city / location 12 Departure date			13 Destination city /	location	,	14 Arrival date	
15 Means of trans	sportation		16 Purpose of travel	of travel 7 Amount			
4 Date	5 Payee name Reliant Energy				7	Amount (\$)	
09/21/2006	6 Payee address; C PO Box 650475 Dallas, TX 75265-0475	City; State; Zip Code				\$403.96	
8 Purpose of pa (See instruction Electricity	yment ons regarding type of information	required.)	9 ** Complete if direct Candidate / Officeho		efit Candid	late/Officeholder **	
			Office sought:				
	or travel outside Texas (complete		Office held:	lional pages if neces	sarv)		
IV Name of perso	on(s) traveling on whose behalf tr	ie expenditure for traver	was made (allacii addii	uonai pages ii rieces:			
11 Departure city	/ location	12 Departure date	13 Destination city /	location		14 Arrival date	
15 Means of transportation			16 Purpose of travel				

POLITICAL EXPENDITURES SCHEDULE F							
The інstruction Guide explains how to complete this form.					1 PAGE # Schedule: 24/27 Report: 26/29		
2 FILER NAME Brown, Peter (Mr.)					3 ACCOUNT # (Ethics Commission filers) 00000001		
4	Date	Date 5 Payee name Ruben Davis Campaign			· · ·	7 Amount (\$)	
08/16/2006 6 Payee address; City; State; Zip Code P.O. Box 2002 Missouri City, TX 77489							\$250.00
Purpose of payment (See instructions regarding type of information required.) Sponsorships			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:				
	· _			Office sought:			
10	<u> </u>	or travel outside Texas (complete		Office held: was made (attach addit	ional pages if necess	sarv)	
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				.,	
11	Departure city	/ location	12 Departure date	13 Destination city / location 14 Arrival date			14 Arrival date
15 Means of transportation				16 Purpose of travel			
4 Date 5 Payee name Save Alief Com. Health & Resource Fair			<u> </u>		7	Amount (\$)	
07/11/2006 6 Payee address; City; State; Zip Code 6911 Leandra Dr. Houston, TX 77083							\$250.00
Purpose of payment (See instructions regarding type of information required.) Sponsorships				9 ** Complete if direct Candidate / Officeho		efit Cand	idate/Officeholder
				Office sought:			
10		or travel outside Texas (complete on(s) traveling on whose behalf the		Office held: was made (attach addit	tional pages if neces	sary)	
·							
11 Departure city / location 12 Departure date			13 Destination city /	location		14 Arrival date	
15 Means of transportation				16 Purpose of travel			

POLITICAL EXPENDITURES SCHEDULE F						
The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 25/27 Report: 27/29		
2 FILER NAME	Brown, Peter (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001			
4 Date 07/25/2006	5 Payee name Shamrock Communication 6 Payee address; C 16528 Park Row Houston, TX 77084			7	Amount (\$) \$95.00	
Headquarters	ns regarding type of information s or travel outside Texas (complete	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held: I was made (attach additional pages if necessary)				
11 Departure city /	location .	13 Destination city / location 14 Arrival date			14 Arrival date	
15 Means of trans	portation	16 Purpose of travel				
4 Date 09/11/2006	5 Payee name Shamrock Communication 6 Payee address; C 16528 Park Row Houston, TX 77084	7 Amount (\$)\$100			* *	
Headquarters	ns regarding type of information s or travel outside Texas (complete	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held: I was made (attach additional pages if necessary)				
11 Departure city / location 12 Departure date 15 Means of transportation			13 Destination city / I 16 Purpose of travel			14 Arrival date

Texas Ethics Com	xas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070			(512)46	3-5800	1-800-325-8506	
POLITICAL EXPENDITURES SCHEDULE F						CHEDULE F	
The Markuchon Guide explains now to complete una form.				1 PAGE# Schedule: 26/	GE# hedule: 26/27 Report; 28/29		
2 FILER NAME	Brown, Peter (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)			
4 Date	4 Date 5 Payee пате UPS Store				7	Amount (\$)	
08/23/2006 6 Payee address; City; State; Zip Code 6524 San Fclipc Houston, TX 77057						\$82.50	
8 Purpose of pay (See instruction Postage & M	ns regarding type of information	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:					
			Office sought:				
Payment fo	or travel outside Texas (complete	boxes 10-16)	Office held:				
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	tional pages if neces	sary)		
11 Departure city	/ location	12 Departure date	13 Destination city /	location		14 Arrival date	
,		·		•			
15 Means of transportation 16 Purpose of travel							
4 Date	5 Payee name US Post Office				7	Amount (\$)	
07/28/2006	6 Payee address; C 401 Franklin Houston, TX 77201				\$430.00		
8 Purpose of pa (See instruction Postage & M	ns regarding type of information	9 ** Complete if direc Candidate / Officeho		efit Cand	idate/Officeholder **		
		Office sought:					
	or travel outside Texas (complete	Office held:					
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)							
11 Departure city / location 12 Departure date			13 Destination city /	location	<u>.</u>	14 Arrival date	
15 Means of transportation			16 Purpose of trave				

POLITICAL EXPENDI	(312)46.	SCHEDULE F				
				•		
The Instruction Guide explains how to cor		1 PAGE # Schedule: 27/27 Report: 29/29				
2 FILER NAME Brown, Peter (Mr.)			3 ACCOUNT # (Ethics Commission filers) 000000001			
4 Date 5 Payee name Young Audiences of h	Houston			7 Amount (\$)		
07/19/2006 6 Payee address; 1800 St. James Place Suite 600 Houston, TX 77056	City; State; Zip Code			\$150.00		
8 Purpose of payment (See instructions regarding type of information Sponsorships	on required.)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:				
		Office sought:				
Payment for travel outside Texas (compl	ete boxes 10-16)	Office held:				
10 Name of person(s) traveling on whose behalf	f the expenditure for travel	was made (attach addi	tional pages if necess	sary)		
11 Departure city / location	12 Departure date	13 Destination city /	location	14 Arrival date		
11 Departure dity / location	12 Departure date	TO Bostingtion only		111111111111111111111111111111111111111		
15 Means of transportation		16 Purpose of travel				
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