Texas Ethics Commission	P.O. Box 120	70 Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506
CANDIDATE SUPPORT &		OLDER REPORT:		FORM C/OH SHEET PG 2
14 C/OH NAME Lane	, James (Mr.)		15 ACCOUNT # 05142011	(Ethics Commission filers)
16 NOTICE FROM POLITICAL	have been made with	tice of political expenditures by political committees to support to out the candidate's or officeholder's knowledge or consent. Car y receive notice of such expenditures	he candidate / officeholder. ndidates and officeholders a	These expenditures may re required to report this
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Ft. Worth Firefighters Committee for Respon	sible Government	
	X GENERAL	COMMITTEE ADDRESS 3855 Tulsa Way Fort Worth, TX 76107-3345		
▼ additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Glynn, J. Michael Jr. (Mr.)		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS 3855 Tulsa Way Fort Worth, TX 76107		
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		80.00
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	76,467.23
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEM	\$	0.00
	4. TOTAL F	OLITICAL EXPENDITURES	\$	145,834.19
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD	\$	33,340.18
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	THE \$	0.00
18 AFFIDAVIT				
Notai My	ARTHA REYES-HEWIT y Public, State of Te Commission Expire October 06, 2013	xas I	des all information requi	
		Signature of	of Candidate or Officeho	lder
AFFIX NOTARY S Swogn to and subscribe	TAMP / SEAL ABOVE	Tim 1 am	, this the	6 day
May 2	, 1	ify which, witness my hand and seal of office.	. 1 .	day
Signature of officer addnir	s Suret	Printname of officer administering oath	Title of officer admin	4 Public Distering oath

CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITCAL COMMITTEE(S)				FORM C/OH ADDENDUM
				Page 3 of 37
C/OH NAME Lane, Ja	ames (Mr.)			ACCOUNT # (Ethics Commission filers) 05142011
17 NOTICE FROM POLITICAL	have been made with	otice of political expenditu nout the candidate's or off ey receive notice of such o	res by political committees to support the candid iceholder's knowledge or consent. Candidates a expenditures. ••	date / officeholder. These expenditures may and officeholders are required to report this
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Ft. Worth Police Officers Association	n Committee for Public Safety
	X GENERAL	COMMITTEE ADDRESS	904 Collier St. Fort Worth, TX 76102	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Kerr, John (Mr.)	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	904 Collier St. Fort Worth, TX 76102	
		-		

UTHER	THAN PLEDGES OR LOA	NS		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2	26 Report: 4/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: 275 Alvarado LLC	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/21/2011	6 Contributor address; City; State; Zip Code 11701 South Fwy. Burleson, TX 76028	•••••	\$1,000.00	
		<u> </u>	(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Ir	nstructions)	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2011	Contributor address; City; State; Zip Code 6145 Wedgewood Fort Worth, TX 76133		\$700.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	estructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/19/2011	Contributor address; City; State; Zip Code 2017 Teakwood Terrace Fort Worth, TX 76112		\$50.00 	
Dain air al				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/13/2011	Contributor address; City; State; Zip Code 121 E. Exchange Ave. Fort Worth, TX 76164		\$500.00 	
Dei-pirat and an annual				exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/04/2011	Contributor address; City; State; Zip Code 910B W. Park Weatherford, TX 76086		\$20.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

	OTTILL	THAN FEEDGES ON LOAD	13		
	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2	26 Report: 5/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beavers, Charles	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/02/2011	6 Contributor address; City; State; Zip Code 4604 E. Lancaster Ave. Fort Worth, TX 76103		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
<u></u>	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/22/2011	Contributor address; City; State; Zip Code 5408 El Dorado Dr. Fort Worth, TX 76107		\$25.00	
					Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/04/2011 Contributor address; City; State; Zip Code 9017 Friendswood Dr. Fort Worth, TX 76123				\$5.00	
	Dringing accum	ation / Job title (See Instructions)		`	Texas, complete Schedule T)
	Principal occup	ration / Job title (See instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2011	Contributor address; City; State; Zip Code 7525 Whitewood Dr. Fort Worth, TX 76137		\$25.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor uut-of-state PAC (ID#_Bourland, Michael and Linda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2011	Contributor address; City; State; Zip Code 6912 Camino Ct. Fort Worth, TX 76126		\$1,000.00 <mark> </mark> 	
		_	İ	(If travel outside of 1	exas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	

The Instruction	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/2	26 Report: 6/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Brender, Art and Lynda	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/19/2011	6 Contributor address; City; State; Zip Code 4121 Hampshire Blvd. Fort Worth, TX 76103		\$500.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/07/2011	Contributor address; City; State; Zip Code 3929 Wosley Dr. Fort Worth, TX 76133		\$100.00	
Deipoipolo			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/02/2011	Contributor address; City; State; Zip Code 1270 Jenkins Rd. Aledo, TX 76008		\$100.00	
- Data di L				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/02/2011	Contributor address; City; State; Zip Code 2002 Grove Park Ln. Richardson, TX 75080		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Caldera, Mayra)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2011	Contributor address; City; State; Zip Code 4916 Water Ridge Ln. Fort Worth, TX 76179		\$20.00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

OTHER	THAN PLEDGES OR LOAD	N9		
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/	26 Report: 7/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Calhoun, Ross	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/03/2011	6 Contributor address; City; State; Zip Code 3709 Santiago Ct. Irving, TX 75062		\$2,000.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/04/2011 Contributor address; City; State; Zip Code 104 Spur Ct. Aledo, TX 76008			\$500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/02/2011	5/02/2011 Contributor address; City; State; Zip Code 5500 Roberts Rd. Grapevine, TX 76051			
				Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor uut-of-state PAC (ID# Committee for Public Safety-Fort Worth Police Off		Amount of contribution (\$)	In-kind contribution description (if applicable)
05/03/2011	Contributor address; City; State; Zip Code 904 Collier St. Fort Worth, TX 76102		\$25,000.00 	
Deinsingle				Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor Unit out-of-state PAC (ID#_Crow, Bob and Jennifer)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/06/2011	Contributor address; City; State; Zip Code 8416 Blue Heron Ct. Fort Worth. TX 76108		\$200.00 <mark> </mark> 	
				exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

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The Instructi	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/2	/26 Report: 8/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Davis, Steve	<i>‡</i>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/07/2011	6 Contributor address; City; State; Zip Code 6412 Geneva Ln. Fort Worth, TX 76131		\$25.00	
				Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	
Date	Full name of contributor uut-of-state PAC (ID# De Anda, Carlos and Dr. Martha)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2011	Contributor address; City; State; Zip Code 2913 Lipscomb St. Fort Worth, TX 76110		\$25.00	
Dringing occur		- Cook		Texas, complete Schedule T)
Principai occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2011	Contributor address; City; State; Zip Code 1105 W. Mason St. Fort Worth, TX 76110		\$40.00 	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/06/2011	Contributor address; City; State; Zip Code 4500 Williams Rd. Benbrook, TX 76126		\$1,000.00 	
		-	<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	itructions)	
Date	Full name of contributor uut-of-state PAC (ID#_Douthitt, Corbin)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/19/2011	Contributor address; City; State; Zip Code 412 Hillview Dr. Hurst, TX 76054		\$100.00 <mark> </mark> 	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Inst	tructions)	

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UITER	THAN PLEDGES OR LOAI	N9		
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/	26 Report: 9/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Drago, Diane	<u>‡)</u>	7 Amount of contribution (\$)	8
04/07/2011	6 Contributor address; City; State; Zip Code 4088 Hidden View Circle Fort Worth, TX 76109		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor ut-of-state PAC (ID# Dugan, Joe	<u>!</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/27/2011	Contributor address; City; State; Zip Code 627 N. Hampton Dallas, TX 75206		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions)	Employer (See In		Toxas, complete contentie ()
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/03/2011	Contributor address; City; State; Zip Code 1217 Clover Ln. Fort Worth, TX 76107		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2011	Contributor address; City; State; Zip Code 6109 Sharon Rd. Fort Worth, TX 76116		\$250.00	[
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	-
Date	Full name of contributor ut-of-state PAC (ID# Earle, Yolanda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/19/2011	Contributor address; City; State; Zip Code 5320 Mansel Ln. Fort Worth, TX 76134		\$25.00 	
			(If travel outside of	Fexas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

	OTHER	THAN PLEDGES OR LOAD	NO		
	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/2	26 Report: 10/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Espino, Victor and Edelmira	<u>#</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/08/2011	6 Contributor address; City; State; Zip Code 2017 Chestnut Ave. Fort Worth, TX 76164		\$40.00	f
	<u></u>			(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#Fender, James	<u>†)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2011	Contributor address; City; State; Zip Code 4505 Ridgehaven Rd. Fort Worth, TX 76116		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	resad, complete concuair 1)
	Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2011	Contributor address; City; State; Zip Code 817 Central Dr. Colleyville, TX 76034		\$300.00	
					Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#Flores, Carlos)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2011	Contributor address; City; State; Zip Code 1413 Circle Park Blvd. Fort Worth, TX 76106		\$150.00	i i
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/19/2011	Contributor address: City; State; Zip Code 2104 Bettibart St. Fort Worth, TX 76134		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		ــــــــــــــــــــــــــــــــــــــ

	UIRER	THAN PLEDGES OR LOAI	N9		
	The Instruction	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/2	26 Report: 11/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ft. Worth Firefighters Committee for Responsible		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Printing Campaign
	04/19/2011	6 Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth, TX 76107-3345	:	\$45.90	Materials
				<u> </u>	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Ft. Worth Firefighters Committee for Responsible		Amount of contribution (\$)	In-kind contribution description (if applicable) Newspaper Ads in La
	04/25/2011	Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth, TX 76107-3345		\$4,000.00	Vida News
				<u> </u>	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Ft. Worth Firefighters Committee for Responsible		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Sign
ı	04/27/2011	Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth, TX 76107-3345		\$2,347.66 	Distribution Supplies I
				(If travel outside of	Texas, complete Schedule T)
_	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2011	Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth, TX 76107-3345		\$18,920.30	Labor for Campaign Administrative Duties, Sign Distribution, and Blockwalking
_				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Ft. Worth Firefighters Committee for Responsible		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign T-Shirts
	05/04/2011	Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth, TX 76107-3345		\$490.37 <mark> </mark>	ł
		1		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins		

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	OTHER	THAN PLEDGES OR LOAI	N5		
	The Instruction	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/2	26 Report: 12/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Gearhart, Marvin	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/04/2011	6 Contributor address; City; State; Zip Code 8805 Forum Way Fort Worth, TX 76140		\$100.00	
				1	f Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Gillette, Sherwood	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2011	Contributor address; City; State; Zip Code 5601 Walla Ave. Fort Worth, TX 76133		\$50.00	
	I	1	1	(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	E m ployer (See Ins	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2011	Contributor address; City; State; Zip Code 4201 N. Main St., Ste. 119 Fort Worth, TX 76106		\$2,500.00	
		<u> </u>		L	Texas, complete Schedule T)
	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Haverner, Gary and Judelle	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/19/2011	Contributor address; City; State; Zip Code P.O. Box 121969 Fort Worth, TX 76121		\$250.00 	
	J	1	J	(If travel outside of	Texas, complete Schedule T)
	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/15/2011	Contributor address; City; State; Zip Code 3021 Cortez Dr. Fort Worth, TX 76116		\$50.00 <mark> </mark> 	1
		1	1	(If travel outside of "	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		
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	OTHER	THAN PLEDGES OR LOAD	NS		
	The Instructiv	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	0/26 Report: 13/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Head, William	<i>‡)</i>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/22/2011	6 Contributor address; City; State; Zip Code 3012 Phoenix Dr. Fort Worth, TX 76116		\$50.00	
				<u> </u>	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	istructions)	
	Date	Full name of contributor ut-of-state PAC (ID# Headroe, Alice	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/07/2011	Contributor address; City; State; Zip Code 2822 Prospect Fort Worth, TX 76106	· · · · · · · · · · · · · · · · · · ·	\$1.00	
	•		ļ	(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor ut-of-state PAC (ID# Higgins, Leslie and Norman	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/04/2011	Contributor address; City; State; Zip Code 2411 Shirley Ave. Fort Worth, TX 76109		\$25.00	
					Texas, complete Schedule T)
-	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#_Hoffman, Jami)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/13/2011	Contributor address; City; State; Zip Code 7901 Lowery Rd. Fort Worth, TX 76120		\$25.00	
	=			<u> </u>	Texas, complete Schedule T)
	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor uut-of-state PAC (ID#_Holmes, Robert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/13/2011	Contributor address; City; State; Zip Code P.O. Box 330665 Fort Worth. TX 76133		\$100.00	
	J			(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		
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	R THAN PLEDGES OR LOA	N9		
The Instruc	rion Guide explains how to complete this form.		1 PAGE# Schedule: 11	/26 Report: 14/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID: Hon, Jackie	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/05/2011	6 Contributor address; City; State; Zip Code 4505 Morris Ct. Fort Worth, TX 76103		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	I Amount of	
Date	Hudson, David and Suzanne	+	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/19/2011	Contributor address; City; State; Zip Code 2812 Broadacres Arlington, TX 76016	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor uut-of-state PAC (ID# Hudson, Mike	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/13/2011	Contributor address; City; State; Zip Code 129 CR 4377 Decatur, TX 76234		\$50.00 	
			(If travel outside of]	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of	In-kind contribution
	Hunt, Lester and Deborah		contribution (\$)	description (if applicable)
04/05/2011	Contributor address; City; State; Zip Code 7332 Madira Fort Worth, TX 76112		\$25.00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Jones, Tony)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/27/2011	Contributor address; City; State; Zip Code 919 W. Montana Chicago. IL 60614		\$1,000.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins		, complete ochedule ()
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	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 12	2/26 Report: 15/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDan Jury, Don and Jo	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/13/2011	6 Contributor address; City; State; Zip Code 436 Haltom Rd. Fort Worth, TX 76117		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
,	04/06/2011	Contributor address; City; State; Zip Code 5205 Cockrell St. Fort Worth, TX 76133		\$25.00	
					Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(05/04/2011	Contributor address; City; State; Zip Code 1104 Lady Amber Ct. Granbury, TX 76049		\$5.00	
				· · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Krampitz, Thomas)	Amount of contribution (\$)	In-kind contribution description (if applicable)
()4/26/2011	Contributor address; City; State; Zip Code 3420 Potomac Ave. Dallas, TX 75205		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
O	04/22/2011	Contributor address; City; State; Zip Code 7209 Laurelhill Ct. S. Fort Worth, TX 76133		\$100.00 	
				(If travel outside of 3	exas, complete Schedule T)
ı	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		sale, complete conedure ()
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	OTHER THAN PLEDGES OR LOANS					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	/26 Report: 16/37	
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Law Office of Jason Mills	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/02/2011	6 Contributor address; City; State; Zip Code 202 W. Central Ave. Fort Worth, TX 76164		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/02/2011	Contributor address; City; State; Zip Code 3001 W. 5th St., Ste. 200 Fort Worth, TX 76107		\$100.00		
	Deitseinstand		F	I '	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/08/2011	Contributor address; City; State; Zip Code 603 E. Belknap St. Fort Worth, TX 76102		\$200.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Lee, James)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/05/2011	Contributor address; City; State; Zip Code 3505 Minot Ave. Fort Worth, TX 76133		\$50.00		
		Foll Worth, 12 76133		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/07/2011	Contributor address; City; State; Zip Code 7729 Blossom Dr. Fort Worth. TX 76133		\$20.00 		
				(If travel outside of 1	Texas, complete Schedule T)	
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	· ·		

OTHER	THAN PLEDGES OR LOAD	N9		
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 14	/26 Report: 17/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Maldonado, Pete	<u>‡</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/06/2011	6 Contributor address; City; State; Zip Code 4860 Waterford Dr. Fort Worth, TX 76179		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/06/2011	Contributor address; City; State; Zip Code 8810 Racquet Club Dr. Fort Worth, TX 76120		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2011	Contributor address; City; State; Zip Code 1744 Yolanda Dr. Fort Worth, TX 76112		\$25.00 	
Dringing cour	obica / Jah Billa (One Instructions)			Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2011	Contributor address; City; State; Zip Code 4200 Stonedale Fort Worth, TX 76116		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor uut-of-state PAC (ID#_Medrano, Mike)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2011	Contributor address; City; State; Zip Code 1809 Lincoln Ave. Fort Worth, TX 76106		\$20.00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
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	OTHER THAN FLEDGES OR LOANS					
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 15	/26 Report: 18/37	
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Mercado, Roman and Helen)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/27/2011	6 Contributor address; City; State; Zip Code 211 E. Central Ave. Fort Worth, TX 76164		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/13/2011	Contributor address; City; State; Zip Code P.O. Box 4660		\$500.00		
		Fort Worth, TX 76164		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/13/2011	Contributor address; City; State; Zip Code 418 W. FM 407 Argyle, TX 76226		\$200.00 		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Minick, Concho and Dawn)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/13/2011	Contributor address; City; State; Zip Code 1621 Western Ave. Fort Worth, TX 76107	••••••	\$200.00 		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Mulhall, Brian and Laurie)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/02/2011	Contributor address; City; State; Zip Code 124 Kristen Dr. Aledo, TX 76008		\$100.00 		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 16	6/26 Report: 19/37	
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID# Munoz, Abundio)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
04/08/2011	6 Contributor address; City; State; Zip Code P.O. Box 101911 Fort Worth, TX 76185		\$60.00	 	
			(If travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In:	structions)		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/08/2011	Contributor address; City; State; Zip Code 3333 Ryaп Ave. Fort Worth, TX 76110		\$50.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See Ins			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/21/2011	Contributor address; City; State; Zip Code 3100 W. 7th St., Ste. 717 Fort Worth, TX 76107		\$222.00		
				Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor uut-of-state PAC (ID# O'Connell, Mary Nell)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/07/2011	Contributor address; City; State; Zip Code 1391 Roaring Springs Rd. Fort Worth, TX 76114		\$50.00 		
Deire eine L				Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)		
Date	Full name of contributor uut-of-state PAC (ID#_Polley, James and Michele)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/19/2011	Contributor address; City; State; Zip Code 7501 Weatherwood Ct. Fort Worth, TX 76133		\$100.00 		
			(If travel outside of T	exas, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer (See Inst	ructions)		

OTHER THAN PLEDGES OR LOANS					
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	7/26 Report: 20/37	
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID# Price, Randy (Dr.)	<i>‡</i>)	7 Amount of contribution (\$)	8	
04/18/2011	6 Contributor address; City; State; Zip Code 1749 Merrick St. Fort Worth, TX 76107		\$250.00	 	
			(If travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)		
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/15/2011	Contributor address; City; State; Zip Code 5600 Azle Ave., Apt. 142 Fort Worth, TX 76106		\$10.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/26/2011	Contributor address; City; State; Zip Code 801 Cherry St., Ste. 3700 Fort Worth, TX 76102		\$500.00	 	
			<u> </u>	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/27/2011	Contributor address; City; State; Zip Code 4400 Ranch View Rd. Fort Worth, TX 76109		\$50.00	 	
				Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
Date	Full name of contributor uut-of-state PAC (ID# Raley Holdings LLC)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/02/2011	Contributor address; City; State; Zip Code 1301 Municipal Way, Ste. 160 Grapevine, TX 76051		\$2,500.00		
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		,	

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OTHER THAN PLEDGES OR LOANS					
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	3/26 Report: 21/37	
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID: Rettew, Lisa	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/07/2011	6 Contributor address; City; State; Zip Code 7509 High View Rd. Weatherford, TX 76085		\$100.00	 	
			(If travel outside of	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Ir	nstructions)		
Date	Full name of contributor ut-of-state PAC (ID=Reynolds, Sherry	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/15/2011	Contributor address; City; State; Zip Code 4524 Morris Ct. Fort Worth, TX 76103		\$10.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)	,	
Date	Full name of contributor ut-of-state PAC (ID#Ritter, Mary	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/06/2011	Contributor address; City; State; Zip Code 4301 El Campo Ave. Fort Worth, TX 76107	• • • • • • • • • • • • • • • • • • • •	\$25.00	 	
				Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/15/2011	Contributor address; City; State; Zip Code 3841 Arroyo Rd. Fort Worth, TX 76109		\$50.00		
				Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
Date	Full name of contributor uut-of-state PAC (ID# Rodriguez, Nelson)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/04/2011	Contributor address; City; State; Zip Code 3109 Lubbock Ave. Fort Worth, TX 76109		\$50.00 <mark> </mark> 		
			(If travel outside of ∃	exas, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)		

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The Instruct	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	9/26 Report: 22/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (IDA Rosales, Cleo	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
04/06/2011	6 Contributor address; City; State; Zip Code 3600 Bryan Ave. Fort Worth, TX 76110	•••••	\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#Ross, Joe)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/27/2011	Contributor address; City; State; Zip Code 4308 Inwood Rd. Fort Worth, TX 76109		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		revas, complete schedule 1)
Date	Full name of contributor ut-of-state PAC (ID#	.)	Amount of	In-kind contribution
	Ruddell, Clara	,	contribution (\$)	description (if applicable)
04/13/2011	Contributor address; City; State; Zip Code 5134 Mitchell-Saxon Rd. Fort Worth, TX 76140		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Russell, Teresa and Kenneth)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/13/2011	Contributor address; City; State; Zip Code 9405 Lechner Rd. Fort Worth, TX 76179		\$200.00 	
			(If travel outside of T	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor ut-of-state PAC (ID#_Salinas, Santiago)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2011	Contributor address; City; State; Zip Code 601 University Dr., Suite 101 Fort Worth, TX 76107		\$100.00 <mark> </mark> 	
		1	(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Inst		,

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The Instruct	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20	0/26 Report: 23/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Salvador Espino Campaign	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/08/2011	6 Contributor address; City; State; Zip Code 3009 Race St. Fort Worth, TX 76114		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor uut-of-state PAC (ID# Sandoval, Eddie	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/05/2011	Contributor address; City; State; Zip Code 4512 Morris Ct. Fort Worth, TX 76103		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2011	Contributor address; City; State; Zip Code 502 Cozby S. Benbrook, TX 76126		\$25.00 	
				Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor uut-of-state PAC (ID# Sayers, Deborah)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2011	Contributor address; City; State; Zip Code 7163 Royal Troon Dr. Fort Worth, TX 76179		\$100.00 <mark> </mark> 	
Deireirei				exas, complete Schedule T)
Principal occup	nation / Job title (See Instructions)	Employer (See Ins	tructions)	
Date	Full name of contributor uut-of-state PAC (ID#_Schafer, Dianne)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/18/2011	Contributor address; City; State; Zip Code 8717 Overland Dr. Fort Worth, TX 76179		\$100.00 <mark> </mark> 	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

	OTHER	THAN PLEDGES OR LOA	N5		
	The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 21	/26 Report: 24/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Shanafelt, Shari	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/15/2011	6 Contributor address; City; State; Zip Code 6455 Lindell Ave. Fort Worth, TX 76116		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(05/02/2011	Contributor address; City; State; Zip Code 5123 Bridgewater Dr. Arlington, TX 76017		\$500.00	
		- ·		(154	· · · · · · · · · · · · · · · · · · ·
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir		Texas, complete Schedule T)
	_	,		, , , , , , , , , , , , , , , , , , , ,	
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(04/27/2011	Contributor address; City; State; Zip Code 2811 5th Ave. Fort Worth, TX 76110		\$50.00	
	Deimain al annum	- Control of the Cont		<u> </u>	Texas, complete Schedule T)
	Filicipal occup	ation / Job title (See Instructions)	Employer (See Ir	nstructions)	
	Date	Full name of contributor uut-of-state PAC (ID# Sides, Helen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
C)5/02/2011	Contributor address; City; State; Zip Code 1213 Lyric Dr. Fort Worth, TX 76134		\$50.00 	
				(If travel outside of l	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	4/05/2011	Contributor address; City; State; Zip Code 6935 Craig St. Fort Worth, TX 76112		\$100.00 <mark> </mark>	
				(If travel outside of T	exas, complete Schedule T)
F	Principal occupa	tion / Job title (See Instructions)	Employer (See In:	structions)	
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The Instruction	ION GUIDE explains how to complete this form.		1 PAGE#	
2 FILER NAME	1 1 /A4- \			2/26 Report: 25/37
4 FILER INAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	T			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Snead, Mack and Debbie)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/08/2011	6 Contributor address; City; State; Zip Code 508 W. Northside Dr. Fort Worth, TX 76164		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	Sours, Joe and Jennifer		contribution (\$)	description (if applicable)
04/05/2011	Contributor address; City; State; Zip Code 2303 Detworth Pl. Fort Worth, TX 76103		\$25.00	!
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Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
•	,	Employo. (552		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/19/2011	Contributor address; City; State; Zip Code 6933 Canyon Springs Rd. Fort Worth, TX 76132		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	<u> </u>
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
	Star Cafe LLC		contribution (\$)	description (if applicable)
04/05/2011	Contributor address; City; State; Zip Code 111 W. Exchange Ave. Fort Worth, TX 76164		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of	In-kind contribution
	Tate, Kayla	,	contribution (\$)	description (if applicable)
05/04/2011	Contributor address; City; State; Zip Code 1104 Lady Amber Ct. Granbury, TX 76049		\$5.00 	
			(If travel outside of 1	exas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	***

L		THAN I LEDGES ON EOA			
	The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 23	3/26 Report: 26/37
2	FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Theobald, Rudolph (Dr.)	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
i	05/02/2011	6 Contributor address; City; State; Zip Code 3704 Altamesa Blvd. Fort Worth, TX 76133		\$100.00	
L				(If travel outside of	Texas, complete Schedule T)
9	Principal occu	pation / Job title (See Instructions)	10 Employer (See li	nstructions)	
	Date	Full name of contributor ut-of-state PAC (ID# Thompson, Terry	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2011	Contributor address; City; State; Zip Code 725 Woodland Ave. Fort Worth, TX 76110		\$50.00	
	Deire die el				Texas, complete Schedule T)
	Principal occuj	pation / Job title (See Instructions)	Employer (See Ir	nstructions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/05/2011	Contributor address; City; State; Zip Code 1867 Shelman Tr. Fort Worth, TX 76112		\$20.00	
_					Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2011	Contributor address; City; State; Zip Code 2808 Raton Dr. Fort Worth, TX 76116		\$20.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	-
	Date	Full name of contributor Tillman, Robert and Patty)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2011	Contributor address; City; State; Zip Code 3609 Clubgate Dr. Fort Worth, TX 76137		\$100.00 	
				(If travel outside of T	exas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		composite contentie ()

OTHER	THAN PLEDGES OR LOAI	.43		
The Instructi	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24	4/26 Report: 27/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT # 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Toal, James	‡)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
05/03/2011	6 Contributor address; City; State; Zip Code 341 Nursery Ln. Fort Worth, TX 76114		\$250.00	I I I
			<u> </u>	f Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Todd, Ann	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/21/2011	Contributor address; City; State; Zip Code 7517 Mason Dells Dr. Dallas, TX 75230		\$500.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	È)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2011	Contributor address; City; State; Zip Code 1713 Lagonda Ave. Fort Worth, TX 76164		\$25.00 	
·			L.'	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2011	Contributor address; City; State; Zip Code 1323 Lee Ave. Fort Worth, TX 76164		\$100.00 	
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	itructions)	
Date	Full name of contributor uut-of-state PAC (ID#_Welch, Jerry and Brenda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2011	Contributor address; City; State; Zip Code 6225 Lakeside Dr Lake Worth, TX 76135		\$100.00 <mark> </mark> 	 -
	l	1	(If travel outside of 1	Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions)	Employer (See Inst		

	- TIANT LEDGES ON LOAD	110		
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 25	5/26 Report: 28/37
2 FILER NAME	Lane, James (Mr.)		3 ACCOUNT# 05142011	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#Welch, Russ and Susan	‡)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
04/06/2011	6 Contributor address; City; State; Zip Code 6232 Granite Creek Dr. Fort Worth, TX 76179		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# West, Robert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/04/2011	Contributor address; City; State; Zip Code 301 Commerce St., Ste. 3500 Fort Worth, TX 76102	•••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/13/2011	Contributor address; City; State; Zip Code 131 E. Exchange Ave., #213 Fort Worth, TX 76164		\$500.00 	
Dringing control	otion / Joh title (Ocea land as to			Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/25/2011	Contributor address; City; State; Zip Code 3716 Fox Hollow Fort Worth, TX 76109		\$35.00 	
Principal occup	ation / Job title (See Instructions)			Texas, complete Schedule T)
r meipar occup	auon / Job tille (See instructions)	Employer (See Ins	structions)	
Date	Full name of contributor uut-of-state PAC (ID#_Wood, Richard and Jennifer)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/22/2011	Contributor address; City; State; Zip Code 255 Callender Lake Dr. Murchison, TX 75778		\$200.00 <mark> </mark> 	
Principal accura	ntion / lob title (See Instructions)			exas, complete Schedule T)
т ппограг оссира	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

OTHER THAN PLEDGES OR LOANS					
The Instruction Guide	explains how to complete this form.	1 PAGE # Schedule: 26/26 Report: 29/37			
2 FILER NAME Lane	, James (Mr.)	3 ACCOUNT # (Ethics Commission file 05142011	ers)		
	Il name of contributor	7 Amount of 8 In-kind contribution (\$) description (if applied			
3504 V	ontributor address; City; State; Zip Code V. Biddison Yorth, TX 76109	\$5.00			
		(If travel outside of Texas, complete Schedule	т) 🔲		
9 Principal occupation / J	ob title (See Instructions)) Employer (See Instructions)			
	Il name of contributor	Amount of In-kind contribution (\$) description (if applied	on able)		
601 N.I	ntributor address; City; State; Zip Code E. 29th St. orth, TX 76106	\$300.00			
		(If travel outside of Texas, complete Schedule	т) 🔲		
Principal occupation / Jo	ob title (See Instructions)	Employer (See Instructions)	-		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/ The Instruction Guide explains how		a category not listed above)
1 PAGE#	2 FILER NAME	iii to complete and a	3 ACCOUNT # (TEC filers)
Schedule: 1/8 Re	eport: 30/37 Lane, James (Mr.)		05142011
4 Date	5 Payee name		
04/10/2011	Baptist Ministers Union of Fort Worth		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$400.00	4100 Horne St.		
	Fort Worth, TX 76107		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	OTHER - Registration	Event Fee for a Table	or rexas, complete concount 1)
OF EXPENDITURE			
CAI ENDITORE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name	-	
04/10/2011	De Leon, Steve		
Amount (\$)	Payee address City; State; Zip Code		
\$400.00	2505 N.W. 27th St.		
,	Fort Worth, TX 76106		
PURPOSE	Category (See Categories listed at the top of this schedule)	•	of Texas, complete Schedule T)
OF	Event Expense	Fundraiser Entertainment	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
04/10/2011 Amount (\$)	Ellman, Glen Payee address City; State; Zip Code		
\$250.00	Benbrook, TX 76126		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE OF	OTHER - Photography	Campaign Material Photog	jraphs
EXPENDITURE			
De elete ONLY #	0	Office accorded.	Off L-14.
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		-
04/25/2011	Ellman, Glen		
Amount (\$)	Payee address City; State; Zip Code		
\$100.00	P.O. Box 126081		
	Benbrook, TX 76126		
	Colorador (Con Colorador Batad et the top of this carbodida)	Description (Managed addition	27
PURPOSE	Category (See Categories listed at the top of this schedule) OTHER - Photography	Description (If travel outside of Campaign Material Photog	of Texas, complete Schedule T)
OF EXPENDITURE	l	Jampaigh Material 1stog	μαρτισ
EXPENDITURE			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense

Loan Repayment/Reimbursement

Consulting Expe Event Expense Fees	Polling Expense Printing Expense	Travel In District Travel Out Of District Office Overhead/Rental Expense GUIDE explains how to complete the	Contributions/Don Candidate/Offic OTHER (enter a c	eholder/Political Committee ategory not listed above)
1 PAGE#	2 FILER NAME		3	ACCOUNT # (TEC filers)
Schedule: 2/8 R			ľ	05142011
4 Date	5 Payee name			002077
05/02/2011	Ellman, Glen			
6 Amount (\$)	7 Payee address City; State;	Zip Code		
\$100.00	P.O. Box 126081 Benbrook, TX 76126			
8	(a) Category (See Categories listed at the top of	f this schedule) (b) Description	on (If travel outside of T	exas, complete Schedule T)
PURPOSE OF	OTHER - Photography		gn Material Photogra	phs
EXPENDITURE			_	
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office	e sought:	Office held:
to benefit C/OH				
Date	Payee name			
04/19/2011	Fort Worth Baseball Club			
Amount (\$)	Payee address City; State;	Zip Code		
\$4,000.00	301 Northeast 6th St.			
, i	Fort Worth, TX 76164			
PURPOSE	Category (See Categories listed at the top of		•	exas, complete Schedule T)
OF	Office Overhead/Rental Expense	Office Le	ase	
EXPENDITURE		}		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	e sought:	Office held:
Date	Payee name			
04/25/2011	Hobbs, Marshall			
Amount (\$)	Payee address City; State;	Zip Code		
\$1,000.00	5804 Goodman			
. ,	Fort Worth, TX 76107			
PURPOSE	Category (See Categories listed at the top of	, , , , , , , , , , , , , , , , , , , ,	`.	exas, complete Schedule T)
OF	Consulting Expense	Profession	onal Services	
EXPENDITURE		i		
Complete ONLY if	Candidate / Officeholder name	Office	sought:	Office held:
direct expenditure		511105	Joughn.	Office field.
to benefit C/OH				
Date	Payee name			
04/19/2011	JUDI Properties, Inc.			
Amount (\$)		Zip Code		
\$450.00	6145 Wedgewood Dr. Fort Worth, TX 76133			
	TOTOTIII, TATOTOO			
	Category (See Categories listed at the top of	this schedule) Description	n (If trough outside of T	von complete Cabasta TV
PURPOSE	Office Overhead/Rental Expense	this schedule) Description Office Lea		xas, complete Schedule T)
OF EXPENDITURE		336 261		
-AI ENDITORE				
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office	sought:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead The Instruction Guide explains ho		enter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 3/8 R			05142011
4 Date	5 Payee name	-	001120
04/29/2011	KHVN 970 AM		
6 Amount (\$)	7 Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	
\$4,000.00			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel out Radio Ad	tside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/10/2011	Leslie Higgins Advertising		
Amount (\$)	Payee address City; State; Zip Code		
\$108.25	2465 Forest Park Blvd. Fort Worth, TX 76110		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel out Advertising	tside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/10/2011	Leslie Higgins Advertising		
Amount (\$)	Payee address City; State; Zip Code		
\$617.03	2465 Forest Park Blvd. Fort Worth, TX 76110		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Consulting Expense	Advertising	,
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/10/2011	Leslie Higgins Advertising		
Amount (\$)	Payee address City; State; Zip Code		
\$17,921.53	2465 Forest Park Blvd. Fort Worth, TX 76110		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outs Advertising	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Lane, James (Mr.) Schedule: 4/8 Report: 33/37 05142011 4 Date 5 Payee name 04/11/2011 Leslie Higgins Advertising 6 Amount (\$) Pavee address City; State; Zip Code 2465 Forest Park Blvd. \$6,950.00 Fort Worth, TX 76110 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/18/2011 Leslie Higgins Advertising Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$1,006.00 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Consulting Expense Advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/19/2011 Leslie Higgins Advertising Amount (\$) Payee address State; City; Zip Code 2465 Forest Park Blvd. \$6,400.00 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/19/2011 Leslie Higgins Advertising Amount (\$) Payee address City: State; Zip Code 2465 Forest Park Blvd. \$14,387,35 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

PURPOSE

OF **EXPENDITURE** Complete ONLY if

direct expenditure to benefit C/OH

Consulting Expense

Candidate / Officeholder name

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Lane, James (Mr.) Schedule: 5/8 Report: 34/37 05142011 4 Date 5 Payee name 04/19/2011 Leslie Higgins Advertising Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$15,318.46 Fort Worth, TX 76110 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/25/2011 Leslie Higgins Advertising Amount (\$) Payee address City: State: Zip Code 2465 Forest Park Blvd. \$15,318.46 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/25/2011 Leslie Higgins Advertising Amount (\$) Payee address State; Zip Code City; 2465 Forest Park Blvd. \$671.15 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Leslie Higgins Advertising 04/27/2011 Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$6,400.00 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Advertising

Office sought:

Office held

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Polling Expense Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Lane, James (Mr.) Schedule: 6/8 Report: 35/37 05142011 5 Payee name Date 04/27/2011 Leslie Higgins Advertising 6 Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$15,394.23 Fort Worth, TX 76110 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 04/27/2011 Leslie Higgins Advertising Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$300.00 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/29/2011 Leslie Higgins Advertising Amount (\$) Payee address City; State; Zip Code 2465 Forest Park Blvd. \$2,371.00 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/02/2011 Leslie Higgins Advertising Payee address Amount (\$) City; State; Zip Code 2465 Forest Park Blvd. \$195.61 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Lane, James (Mr.) Schedule: 7/8 Report: 36/37 05142011 4 Date 5 Payee name Leslie Higgins Advertising 05/02/2011 Amount (\$) Payee address City; State: Zip Code 2465 Forest Park Blvd. \$6,400.00 Fort Worth, TX 76110 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Advertising OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/02/2011 Leslie Higgins Advertising City; State; Zip Code Amount (\$) Payee address 2465 Forest Park Blvd. \$8,500.00 Fort Worth, TX 76110 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Advertising Consulting Expense OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 05/02/2011 Leslie Higgins Advertising Payee address State; Amount (\$) City; Zip Code 2465 Forest Park Blvd. \$15,318,46 Fort Worth, TX 76110 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Consulting Expense OF EXPENDITURE Office sought: Candidate / Officeholder name Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Panorama News 04/27/2011 Payee address State; Zip Code Amount (\$) City; 3501 Williams Rd. \$475.00 Fort Worth, TX 76116 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Campaign Ad Advertising Expense OF **EXPENDITURE** Office held Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal S nse Food/Be Polling I	vards/Memorial Expense ervices everage Expense Expense Expense	Salaries/Wages/O Solicitation/Fundr Travel In District Travel Out Of Dist Office Overhead/F Guide explains how	contract Labor aising Expense trict	Transportation E Contributions/Do Candidate/Of OTHER (enter a	nt/Reimbursement Equipment & Related onations Made By ficeholder/Political C category not listed	Committee
1 PAGE#		2 FILER NAME				3 ACCOUNT#	(TEC filers)
Schedule: 8/8 Re		Lane, James (Mr.)	····			05142011	
4 Date 04/19/2011	5 Payee name	Productions					
6 Amount (\$)	7 Payee addres		Zip Code				
\$750.00	3817 S.W. B	• • • • • • • • • • • • • • • • • • • •	2.p 0000				
	Fort Worth,	TX 76116					
8 PURPOSE		e Categories listed at the top o	of this schedule)	(b) Description		f Texas, complete S	chedule T)
OF	Advertising E	:xpense		Campaign M	laterial Photogr	raphs	
EXPENDITURE							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sou	ght:	Office held:	
Date	Payee name						
05/04/2011	PayPal						
Amount (\$)	Payee address	•	Zip Code				
\$26.66	2211 N. First San Jose, C						
PUPPOSE	Category (See	Categories listed at the top o	f this schedule)	Description	(If travel outside of	Texas, complete S	chedule T)
PURPOSE OF	Accounting/E	Banking		On-Line Con	tribution Servic	e Fees	_
EXPENDITURE							
Complete ONLY if	Candidate / Of	ficeholder name		Office sou	aht:	Office held:	
direct expenditure to benefit C/OH					9	omee neid.	
	Douge ware						
Date 04/10/2011	Payee name Picoso's Res	taurant					
Amount (\$)	Payee address		Zin Code				
\$305.00	1950 Menefe	• • • • • • • • • • • • • • • • • • • •	Zip Code				
Ψουσ.σσ	Fort Worth,						
	Catagoni (0						
PURPOSE	Food/Bevera	Categories listed at the top of de Expense	rthis schedule)	Description Catering	(If travel outside of	Texas, complete So	hedule T)
OF EXPENDITURE	1 000/201014	go Expense		Catering			
EXPENDITORE							
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name		Office sou	ght:	Office held:	