

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME
JOHN STEVENSON

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

•• This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ••

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

17 NO REPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

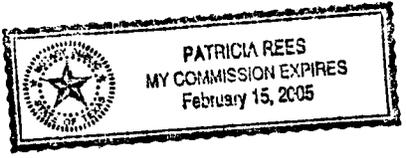
EXPENDITURE TOTALS

OUTSTANDING LOAN TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 57,405.00
3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 190.00
4. TOTAL POLITICAL EXPENDITURES	\$ 28,129.30
5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 690.00

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



John Stevenson
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John Stevenson, this the 24 day of April, 2003, to certify which, witness my hand and seal of office.

Patricia Rees
Signature of officer administering oath

Patricia Rees
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: <div style="text-align: right; margin-right: 20px;">1</div>
2 FILER NAME <div style="text-align: center; margin-top: 10px;">John Stevenson</div>		3 ACCOUNT # (Ethics Commission filers)
4 Date <div style="margin-top: 10px;">4/21/03</div>	5 Payee name <div style="margin-top: 5px;">Judy Needham</div> 6 Payee address; City; State; Zip Code <div style="margin-top: 5px;">5328 Collinwood Fort Worth, Texas</div> 7 Purpose of expenditure (See instructions regarding type of information required.) <div style="margin-top: 5px;">sign materials and supplies</div>	8 Amount (\$) <div style="margin-top: 10px; text-align: center;">300.</div> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1 (FOR FORMS C/OH & SPAC)

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 44

2 FILER NAME

John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date
4/4/03

5 Full name of contributor out of state PAC
Shirlee and Taylor Gandy

6 Contributor address: City: State: Zip code
1051 W. Seventh, Apt. 311
Fort Worth TX

7 Amount of
Contribution (\$)
500

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/4/03

5 Full name of contributor out of state PAC
Lynda and Grady Shropshire

6 Contributor address: City: State: Zip code
108 N. Rivercrest Dr.
Fort Worth TX

7 Amount of
Contribution (\$)
100

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/4/03

5 Full name of contributor out of state PAC
Linda and Jim Teague

6 Contributor address: City: State: Zip code
125 Williamsburg Ln.
Fort Worth TX

7 Amount of
Contribution (\$)
100

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/4/03

5 Full name of contributor out of state PAC
Judith S. Nowlin

6 Contributor address: City: State: Zip code
2124 Highland Park West
Fort Worth TX

7 Amount of
Contribution (\$)
25

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/4/03

5 Full name of contributor out of state PAC
Virginia and Al Covaleski

6 Contributor address: City: State: Zip code
228 Casa Blanca
Fort Worth TX

7 Amount of
Contribution (\$)
75

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS	SCHEDULE A1 (FOR FORMS C/OH & SPAC)
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THE INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A: 44
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2 FILER NAME <p style="text-align: center;">John Stevenson</p>	3 ACCOUNT # (Ethics Commission filers)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Carolyn and Chris Goetz	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 2343 Winton Terrace West Fort Worth TX			

9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Felice and Marvin Girouard	7 Amount of Contribution (\$) 500	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 2433 Medford Court East Fort Worth TX			

9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Carol and Denny Alexander	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 2928 Alton Road Fort Worth TX			

9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Gretchen Denny	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 301 Rivercrest Drive Fort Worth TX			

9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Pauline and T.L. Shields	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 3904 Inwood Road Fort Worth TX			

9 Principal Occupation (Optional)	10 Employer (Optional)
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<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 44

2 FILER NAME John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Patsy and Scott McDonald	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
	6 Contributor address: City: State: Zip code 3913 Hamilton Fort Worth TX		

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Alice and Bill Cranz	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
	6 Contributor address: City: State: Zip code 4001 W. Fifth St. Fort Worth TX		

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC John Molyneaux	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
	6 Contributor address: City: State: Zip code 4008 Tamworth Fort Worth TX		

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Fran and Bob Bolen	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
	6 Contributor address: City: State: Zip code 4213 Candlewind Lane Fort Worth TX		

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Catherine and Bill Todd, Jr.	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
	6 Contributor address: City: State: Zip code 4230 Clear Lake Ct. Fort Worth TX		

9 Principal Occupation (Optional) | **10** Employer (Optional)

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**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

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1 Total pages Schedule A: 44

2 FILER NAME John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Carol and Richard Minker 6 Contributor address: City: State: Zip code 4258 Altura Road Fort Worth TX	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Carol and Ronnie Goldman 6 Contributor address: City: State: Zip code 4401 Overton Crest Fort Worth TX	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Bet and Mike Ulyshen 6 Contributor address: City: State: Zip code 4713 Oak Trail Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Virginia S. Odom 6 Contributor address: City: State: Zip code 4800 Dexter Fort Worth TX	7 Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Virginia and Charles Ringer 6 Contributor address: City: State: Zip code 4800 Harley Avenue Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional) | **10** Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 44

2 FILER NAME John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Carol and Jim Dunaway	7 Amount of Contribution (\$) 500	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 500 Alta Drive Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Trellise Brennan	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 500 Hazelwood Dr. Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Tom Seymour	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 5535 Collinwood Ave. Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Elizabeth and Paul Ray, Jr.	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 5914 El Campo Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Ann and Joe Pace	7 Amount of Contribution (\$) 500	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 6307 Rosemont Ave. Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **44**

2 FILER NAME **John Stevenson**

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Helen and Bob Lewis 6 Contributor address: City: State: Zip code 6316 Klamath Road Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation(Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Marjorie and Richard Griffin 6 Contributor address: City: State: Zip code 6821 Middle Road Fort Worth TX	7 Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation(Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Marvin Gearhart 6 Contributor address: City: State: Zip code 7601 Will Rogers Blvd. Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation(Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Joann H. Mastin 6 Contributor address: City: State: Zip code 912 Alta Drive Fort Worth TX	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation(Optional) | **10** Employer (Optional)

4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Sandra and Rice Tilley, Jr. 6 Contributor address: City: State: Zip code 9975 Boat Club Road Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation(Optional) | **10** Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS	SCHEDULE A1 (FOR FORMS C/OH & SPAC)
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THE INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule A: 44
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2 FILER NAME <p style="text-align: center;">John Stevenson</p>	3 ACCOUNT # (Ethics Commission filers)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Janie and George Beggs <hr/> 6 Contributor address: City: State: Zip code c/o Beggs Ranch Aledo TX	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Judy and Gary Havener <hr/> 6 Contributor address: City: State: Zip code P.O. Box 121697 Fort Worth TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/4/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Patsy L. Cantrell <hr/> 6 Contributor address: City: State: Zip code P.O. Box 277 Cresson TX	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Patricia Cole <hr/> 6 Contributor address: City: State: Zip code Fort Worth TX	7 Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional)	10 Employer (Optional)
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4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Michael A. Reilly <hr/> 6 Contributor address: City: State: Zip code 1000 Ballpark Way, Ste. 304 Arlington TX	7 Amount of Contribution (\$) 250	8 In-Kind Contribution description (if applicable)
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9 Principal Occupation (Optional)	10 Employer (Optional)
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<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **44**

2 FILER NAME
John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Ken and Jean Devero	7 Amount of Contribution (\$) 25	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1000 Henderson # 137 Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Karen and Kenneth Barr	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1000 Macon Street Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Buddy and Sara Dike	7 Amount of Contribution (\$) 500	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1108 Shady Oaks Ln. Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Charles M. Simmons	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1120 Shady Oaks Land Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Teresa and Bob Hawley	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 116 Lindenwood Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

THE INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **44**

2 FILER NAME

John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date
4/6/03

5 Full name of contributor out of state PAC
Terri and Luke Ellis

6 Contributor address: City: State: Zip code
1206 Mistletoe Drive
Fort Worth TX

7 Amount of
Contribution (\$)
1,000

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/6/03

5 Full name of contributor out of state PAC
Beverly and Joe Orr

6 Contributor address: City: State: Zip code
1209 Virginia Place
Fort Worth TX

7 Amount of
Contribution (\$)
25

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/6/03

5 Full name of contributor out of state PAC
Toni and Charley Geren

6 Contributor address: City: State: Zip code
1209 Washington Terrace
Fort Worth TX

7 Amount of
Contribution (\$)
250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/6/03

5 Full name of contributor out of state PAC
Mr. and Mrs. Tom Delatour

6 Contributor address: City: State: Zip code
1215 Shady Oaks Lane
Fort Worth TX

7 Amount of
Contribution (\$)
1,000

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date
4/6/03

5 Full name of contributor out of state PAC
Deborah and Tom Sturdivant

6 Contributor address: City: State: Zip code
1308 Juneau Court
Fort Worth TX

7 Amount of
Contribution (\$)
100

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

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1 Total pages Schedule A: 44

2 FILER NAME John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Randy French	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1320 S. University Dr., #400 Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Betty Ann Ratliff	7 Amount of Contribution (\$) 50	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1339 Roaring Springs Rd. Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Mr. and Mrs. John L. Marion	7 Amount of Contribution (\$) 1,000	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1400 Shady Oaks Lane Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Beth and Ronald Parrish	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1419 Thomas Place Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

4 Date 4/6/03	5 Full name of contributor <input type="checkbox"/> out of state PAC Adele and Mark Hart	7 Amount of Contribution (\$) 100	8 In-Kind Contribution description (if applicable)
6 Contributor address: City: State: Zip code 1500 Alta Drive Fort Worth TX			

9 Principal Occupation (Optional) | **10** Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

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1 Total pages Schedule A: 44

2 FILER NAME

John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/6/03

5 Full name of contributor out of state PAC

Joanne and Tom Turner

6 Contributor address: City: State: Zip code

1512 Thomas Place

Fort Worth TX

7 Amount of
Contribution (\$)

250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor out of state PAC

Marsha and Terry Wright

6 Contributor address: City: State: Zip code

1605 Ashland

Fort Worth TX

7 Amount of
Contribution (\$)

100

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor out of state PAC

Ann and Bill Greenhill

6 Contributor address: City: State: Zip code

1608 Ashland

Fort Worth TX

7 Amount of
Contribution (\$)

250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor out of state PAC

William Y. Harvey

6 Contributor address: City: State: Zip code

1615 Carleton Avenue

Fort Worth TX

7 Amount of
Contribution (\$)

100

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor out of state PAC

Mrs. Fred Reynolds

6 Contributor address: City: State: Zip code

1701 Hulen Street

Fort Worth TX

7 Amount of
Contribution (\$)

250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1
(FOR FORMS C/OH & SPAC)**

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1 Total pages Schedule A: 44

2 FILER NAME

John Stevenson

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/6/03

5 Full name of contributor

out of state PAC

Donna and Randy Brown

6 Contributor address: City: State: Zip code

1704 Tremont

Fort Worth TX

7 Amount of
Contribution (\$)

500

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor

out of state PAC

Mrs. James S. Garvey

6 Contributor address: City: State: Zip code

1729 Carleton

Fort Worth TX

7 Amount of
Contribution (\$)

250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor

out of state PAC

Richard L. Bourland

6 Contributor address: City: State: Zip code

17911 Highway 377 South

Fort Worth TX

7 Amount of
Contribution (\$)

150

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor

out of state PAC

Margaret and David Sykes

6 Contributor address: City: State: Zip code

2000 Spanish Trail

Fort Worth TX

7 Amount of
Contribution (\$)

250

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

4 Date

4/6/03

5 Full name of contributor

out of state PAC

KPAC

6 Contributor address: City: State: Zip code

201 Main Street

Fort Worth TX

7 Amount of
Contribution (\$)

1,000

8 In-Kind Contribution
description (if applicable)

9 Principal Occupation (Optional)

10 Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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