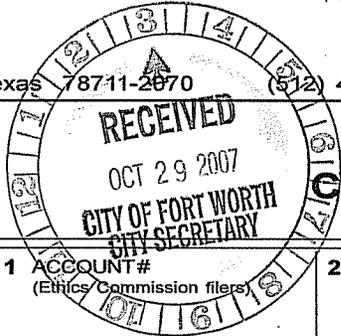


**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**



**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics/Commission filers)

2 Total pages filed:
17

3 CANDIDATE / OFFICEHOLDER NAME

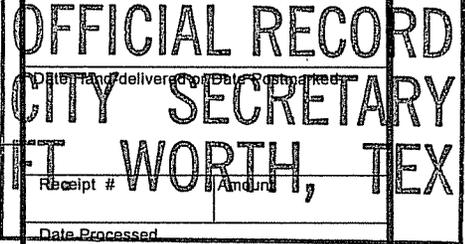
MS / MRS / MR FIRST MI
Mr. James F.
NICKNAME LAST SUFFIX
Jim Beckman

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2400 Medford Ct. E.
Fort Worth, TX 76109
 Change of Address



5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 992-5358

Receipt #

Date Processed

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr. William G.
NICKNAME LAST SUFFIX
Bill Hall

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2308 Medford Ct. W. Fort Worth, TX 76109

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 371-1177

9 REPORT TYPE

January 15 30th day before election Final report (Attach C/OH - FR) Exceeded \$500 limit
 July 15 8th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
9 / 27 / 07 THROUGH 10 / 27 / 07

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
11 / 06 / 07
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)
None

13 OFFICE SOUGHT (if known)
City Council-District 9

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME Jim Beckman **16 ACCOUNT # (Ethics Commission Filers)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

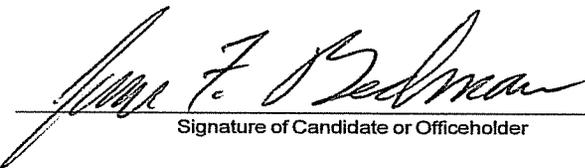
** This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they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

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ None
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <i>See note below*</i>	\$ 14,245.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ None
	4. TOTAL POLITICAL EXPENDITURES	\$ 47,204.03
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 55,567.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100,000.00

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.


 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Beckman, this the 29th day of October, 2007, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Miki F. Smith
 Printed name of officer administering oath

Notary Public
 Title of officer administering oath

* Contributions reflect all contributions during this filing period, some of which were previously reported on the 30 day out report. Revised 10/02/2006

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 1 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/26/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert & Nancy Burford 6 Contributor address; City; State; Zip Code 3253 Rogers Ave. Fort Worth, TX 76109-2259	7 Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/26/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Pebbles Contributor address; City; State; Zip Code 2325 Mistletoe Ave. Fort Worth, TX 76109	Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade T. Nowlin Contributor address; City; State; Zip Code 510 Hazlewood Dr. Fort Worth, TX 76107-1551	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall Gideon Contributor address; City; State; Zip Code 3812 Monticello Fort Worth, TX 76107	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/29/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marty Leonard Contributor address; City; State; Zip Code 1411 Shady Oaks Lane Fort Worth, TX 76107	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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 A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 2 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/28/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee & Becky Finley	7 Amount of contribution (\$) \$ 100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2412 Medford Ct. E. Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson & Susan Smith	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2433 Medford Ct. W Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James DuBose	Amount of contribution (\$) \$3,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2626 A. West Freeway Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Tom & Adelaide Leavens	Amount of contribution (\$) \$250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3839 South Hills Circle Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Barry	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 409 Rivercrest Drive Fort Worth, TX 76107		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 3 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/28/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T. A. Howeth	7 Amount of contribution (\$) \$50	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6224 Curzon Fort Worth, TX 76116-4603		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William E. Tucker	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2337 Colonial Pkwy Fort Worth, TX 76109-1030		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Palko	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2409 Winton Terrace W. Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Rogers	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 201 Pecan Street Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambuth & Sally Tomlinson	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4220 Blackhaw Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 4 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/28/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary & Allan Graham	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2305 Medford Court E Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Barnard	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2421 Medford Ct. W. Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Roach	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2805 Alton Road Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good Government Fund	Amount of contribution (\$) \$1,250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 201 Main Street, Suite 2500 Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PSEL PAC	Amount of contribution (\$) \$1.250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 201 Main Street, Suite 2500 Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 5 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/28/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard D. & Carol G. Minker	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4258 Altura Road Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/28/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louise Appleman	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 801 Cherry Street, STE 1600 Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Granger	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 715 Jones Street, Suite 201 Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Webb	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2433 Lofton Terrace Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/5/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don & Linda Craig	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2884 Oakbriar Trail Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 6 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/6/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Roxy Stevenson 6 Contributor address; City; State; Zip Code 1207 Hilcrest St. Fort Worth, TX 76107	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wes & Peggy Stewart Contributor address; City; State; Zip Code 2340 Medford Ct. W. Fort Worth, TX 76109	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/6/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha & Rob Park Contributor address; City; State; Zip Code 2332 Medford Ct. E. Fort Worth, TX 76109	Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/8/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Austin Contributor address; City; State; Zip Code 2017 Teakwood Terrace Fort Worth, TX 76112-5430	Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/1/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaine & Tim Petrus Contributor address; City; State; Zip Code 3736 Country Club Circle Fort Worth, TX 76109	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 7 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/23/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftin Witcher 6 Contributor address; City; State; Zip Code 3991 W. Vickery Blvd. Fort Worth, TX 76107	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Robert Martin Contributor address; City; State; Zip Code 2317 Medford Ct. E. Fort Worth, TX 76109	Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/22/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom & Lise Bessant Contributor address; City; State; Zip Code 2237 Winton Terrace West Fort Worth, TX 76109	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/21/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill & Ann Greenhill Contributor address; City; State; Zip Code 1608 Ashland Ave Fort Worth, TX 76107	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/19/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles & Donna Livingston Contributor address; City; State; Zip Code 2532 Waits Ave. Fort Worth, TX 76109	Amount of contribution (\$) \$50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 8 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/24/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil & Carol Ray 6 Contributor address; City; State; Zip Code 1700 Carleton Fort Worth, TX 76107	7 Amount of contribution (\$) \$50	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Asher Contributor address; City; State; Zip Code 2300 Mistletoe Drive Fort Worth, TX 76110	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Andrews Contributor address; City; State; Zip Code 3500 Elm Creek Court Fort Worth, TX 76109	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/22/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Don Williamson Contributor address; City; State; Zip Code 1300 S. University Dr., Suite 410 Fort Worth, TX 76109	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/24/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William & Francis Read Contributor address; City; State; Zip Code 2331 Medford Ct. E Fort Worth, TX 76109	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 9 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/22/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George & Pam Armstrong 6 Contributor address; City; State; Zip Code 2335 Winton Terrace W. Fort Worth, TX 76109	7 Amount of contribution (\$) \$200	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Oliver Contributor address; City; State; Zip Code 701 E. Bluff Street, #7411 Fort Worth, TX 76102-2312	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark & Sherry Denton Contributor address; City; State; Zip Code 2304 Medford Ct. W. Fort Worth, TX 76109	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby & Betty Bragan Contributor address; City; State; Zip Code 5212 Collinwood Fort Worth, TX 76107	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Katherine Anderson Contributor address; City; State; Zip Code 2403 Medford Ct. E. Fort Worth, TX 76109	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 10 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/17/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Ryan	7 Amount of contribution (\$) \$150	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6320 Inca Road Fort Worth, TX 76116-2070		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/19/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon & Nancy Bryant	Amount of contribution (\$) \$250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1712 Carleton Fort Worth, TX 76107		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/8/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim & Faith Mallory	Amount of contribution (\$) \$25	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2400 Winton Terrace East Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price & Judy Husley	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2205 Winton Terrace West Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/6/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Bobette Grant	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2425 Medford Ct. E. Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<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 A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 11 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/8/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felice & Marvin Girouard 6 Contributor address; City; State; Zip Code 2433 Medford Ct. E. Fort Worth, TX 76109	7 Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol & Jay Hendrix Contributor address; City; State; Zip Code 4022 Modlin Ave. Fort Worth, TX 76107	Amount of contribution (\$) \$25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/10/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug & Judy Harman Contributor address; City; State; Zip Code 2222 Winton Terrace East Fort Worth, TX 76109	Amount of contribution (\$) \$125 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Jane Freese Contributor address; City; State; Zip Code 2221 Colonial Parkway Fort Worth, TX 76109	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/26/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don & Jane Johnston Contributor address; City; State; Zip Code 2301 Medford Ct. W. Fort Worth, TX 76109	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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 A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 12 of 13	
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/25/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R. Denny Alexander	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4200 S. Hulen St., Suite 617 Fort Worth, TX 76109-4911		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Haws Cooper	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2213 Wilshire Blvd. For Worth, TX 76110		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan & Barbara Livingston	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2536 Waits Ave. Fort Worth, TX 76109		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Reynolds	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1605 Sunset Terrace Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R.E. Haubold	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2019 Ward Parkway Fort Worth, TX 76110		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: Page 13 of 13	
2 FILER NAME		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/26/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger & Fran Blake 6 Contributor address; City; State; Zip Code 1924 Kensington Dr. Fort Worth, TX 76110	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/26/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thuy & Jim Saliba Contributor address; City; State; Zip Code P.O. Box 9198 Fort Worth, TX 76147	Amount of contribution (\$) \$20 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL EXPENDITURES		SCHEDULE F
The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: Page 1 of 2
2 FILER NAME Jim Beckman		3 ACCOUNT # (Ethics Commission filers)
4 Date 10-8-07	5 Payee name The Eppstein Group 6 Payee address; City; State; Zip Code 4055 International Parkway, Suite 600 Fort Worth, TX 76109	7 Amount (\$) \$15,000.00
8 Purpose of payment (See instructions regarding type of information required.) Political consulting expenditures (If travel outside of Texas, complete Schedule T)		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 10-8-07	Payee name The Eppstein Group Payee address; City; State; Zip Code 4055 International Parkway, Suite 600 Fort Worth, TX 76109	Amount (\$) \$3,744.37
Purpose of payment (See instructions regarding type of information required.) Mailers and campaign materials (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 9/28/07	Payee name Office Depot Payee address; City; State; Zip Code 401 Carroll Street Fort Worth, TX 76107	Amount (\$) \$303.09
Purpose of payment (See instructions regarding type of information required.) Computer expenses (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 10/1/07	Payee name Pair Network Payee address; City; State; Zip Code 2403 Sidney St., Suite 210 Pittsburgh, PA 15203	Amount (\$) \$186.50
Purpose of payment (See instructions regarding type of information required.) web-site hosting (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES **SCHEDULE F**

The Instruction Guide explains how to complete this form. **1** Total pages Schedule F:
Page 2 of 2

2 FILER NAME
Jim Beckman **3** ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
10/4/07	Check Depot	\$96.67
	6 Payee address; City; State; Zip Code	
	3439 Technology Drive	
	North Venice, FL 34275	

8 Purpose of payment (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
10/7/07	Adobe Store	\$172.12
	Payee address; City; State; Zip Code	
	345 Park Avenue	
	San Jose, CA 95110-2704	

Purpose of payment (See instructions regarding type of information required.) Computer Expense (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
10/24/07	The Eppstein Group	\$27,701.28
	Payee address; City; State; Zip Code	
	4055 International Parkway, Suite 600	
	Fort Worth, TX 76109	

Purpose of payment (See instructions regarding type of information required.) Mailers and campaign materials (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

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