

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/22 Report: 16/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nickelson, Chris 6 Contributor address; City; State; Zip Code 2943 6th Ave Fort WOrth, TX 76110	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Neil, Anna Contributor address; City; State; Zip Code 125 Bent Tree Ct Aledo, TX 76008	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parmer, Evelyn Contributor address; City; State; Zip Code 4310 W. 25th Saint Louis Park, MN 55416	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peabody, Pete Contributor address; City; State; Zip Code 3210 Carlisle Dallas, TX 75204	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perdue, Brackett, Flores, Utt & Burns Contributor address; City; State; Zip Code 307 W. Seventh #1225 Fort Worth, TX 76102	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/22 Report: 17/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Poynter, Hayden and Robin 6 Contributor address; City; State; Zip Code 100 Muir Hill Aledo, TX 76008	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Poynter, Hayden and Robin Contributor address; City; State; Zip Code 100 Muir Hill Aledo, TX 76008	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/19/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randle, Patricia Contributor address; City; State; Zip Code 2216 Lipscomb Fort Worth, TX 76110	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richie, Boyd and Betty Contributor address; City; State; Zip Code 1307 Roanoke Graham, TX 76450	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, John Contributor address; City; State; Zip Code 3927 Bowser Avenue Dallas, TX 75219	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/22 Report: 18/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Adam 6 Contributor address; City; State; Zip Code AP Farm Cross River, NY 10518	7 Amount of contribution (\$) \$750.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/15/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruggless, Ronald Contributor address; City; State; Zip Code 3825 Meadowdale Lane Dallas, TX 75229	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawyer, Jerry and Judy Contributor address; City; State; Zip Code 500 Throckmorton Fort Worth, TX 76102	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Rose Lynne Contributor address; City; State; Zip Code 2340 Mistletoe Fort Worth, TX 76110	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Self, Tracy and Joe Contributor address; City; State; Zip Code 2945 Lubbock Fort Worth, TX 76109	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 17/22 Report: 19/30	
2 FILER NAME Burns, Joel (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smallwood, John	7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code PO Box 3002 Birmingham, AL 35203		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 10/13/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Kelly (Ms.)	Amount of contribution (\$) \$325.00		In-kind contribution description (if applicable) lunches
Contributor address; City; State; Zip Code 3431 West 7th Street Fort Worth, TX 76107		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spanjian, Laura	Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 611 Diamond Street San Francisco, CA 94114		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanford, Carol	Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2043 Ward Parkway Fort WOrth, TX 76110		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stepp, James	Amount of contribution (\$) \$500.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3 Sheridan Square New York, NY 10014		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/22 Report: 20/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/26/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stepp, James 6 Contributor address; City; State; Zip Code 3 Sheridan Square New York, NY 10014	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tarrant County Stonewall Democrats 6 Contributor address; City; State; Zip Code P.O. Box 185363 Fort Worth, TX 76110	7 Amount of contribution (\$) \$330.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thistlethwaite, M & R. S. 6 Contributor address; City; State; Zip Code TCU Box 298000 Fort Worth, TX 76129	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/10/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Glenda 6 Contributor address; City; State; Zip Code 1968 Lipscomb Fort Worth, TX 76110	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Glenda 6 Contributor address; City; State; Zip Code 1968 Lipscomb Fort Worth, TX 76110	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/22 Report: 21/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tilden, Kevin 6 Contributor address; City; State; Zip Code 4215 Ardin Way San Diego, CA 92103	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Toole, Michael Contributor address; City; State; Zip Code 4158 Inman Ct Fort Worth, TX 76109	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/15/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Turner, Chris and Lisa Contributor address; City; State; Zip Code 201 Meadering Lane Burleson, TX 76028	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/02/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyson, Margaret Contributor address; City; State; Zip Code 3060 Bellaire Ranch Fort Worth, TX 76109	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/19/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyson, Margaret Contributor address; City; State; Zip Code 3060 Bellaire Ranch Fort Worth, TX 76109	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/22 Report: 22/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Updike, Jeff 6 Contributor address; City; State; Zip Code 6522 Robin Dallas, TX 75209	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 10/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Hook, Steven Contributor address; City; State; Zip Code 129 NW 19th OKC, OK 73103	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/15/2007	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# 00060101) Victory Fund Contributor address; City; State; Zip Code 1133 15th Street, NW #350 Washington DC, DC 80005	Amount of contribution (\$) \$600.00	In-kind contribution description (if applicable) email services
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/15/2007	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# 00060101) Victory Fund Contributor address; City; State; Zip Code 1133 15th Street, NW #350 Washington DC, DC 80005	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Voigt, Chris Contributor address; City; State; Zip Code 10241 E. Rancho Diego Crowley, TX 76036	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/22 Report: 23/30	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 10/11/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warren, Shelley 6 Contributor address; City; State; Zip Code 2004 Lynnehaven Fort Worth, TX 76103	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/16/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weir, Steven Contributor address; City; State; Zip Code 3841 Peter Pan Dallas, TX 75229	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/16/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Welsh, Kenneth Contributor address; City; State; Zip Code 10638 Royal Springs Drive Dallas, TX 75229	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Janet Contributor address; City; State; Zip Code 2214 Fairmount Fort WOrth, TX 76110	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Janet Contributor address; City; State; Zip Code 2214 Fairmount Fort WOrth, TX 76110	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 25/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/22/2007	5 Payee name AT&T 6 Payee address; City; State; Zip Code 308 S. Akard Street Dallas, TX 75202	7 Amount (\$) \$501.48
8 Purpose of payment (See instructions regarding type of information required.) Phones (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/17/2007	Payee name Burnet, Cliff (Mr.) Payee address; City; State; Zip Code 1924 Oakland Drive Fort Worth, TX 76103	Amount (\$) \$214.00
Purpose of payment (See instructions regarding type of information required.) thank you gifts (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/22/2007	Payee name CDW Graphics Payee address; City; State; Zip Code 1201 W. Park Row Drive Arlington, TX 76013	Amount (\$) \$433.00
Purpose of payment (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/22/2007	Payee name Chadderdon Group Payee address; City; State; Zip Code 3311 S Wakefield St Apt B Arlington, VA 22206	Amount (\$) \$10,000.00
Purpose of payment (See instructions regarding type of information required.) printing and postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/6 Report: 26/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/01/2007	5 Payee name Civic Strategies, LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$9,149.32
8 Purpose of payment (See instructions regarding type of information required.) printing and postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/04/2007	Payee name Civic Strategies, LLC Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	Amount (\$) \$4,449.13
Purpose of payment (See instructions regarding type of information required.) printing and postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/12/2007	Payee name Civic Strategies, LLC Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	Amount (\$) \$4,572.13
Purpose of payment (See instructions regarding type of information required.) printing and postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/16/2007	Payee name Civic Strategies, LLC Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	Amount (\$) \$7,727.98
Purpose of payment (See instructions regarding type of information required.) printing and postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 27/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/23/2007	5 Payee name Civic Strategies, LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$1,000.00
8 Purpose of payment (See instructions regarding type of information required.) consulting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/22/2007	Payee name Langley, Russell (Mr.) Payee address; City; State; Zip Code 3521 Oak Lawn Avenue, #115 Dallas, TX 75219	Amount (\$) \$343.31
Purpose of payment (See instructions regarding type of information required.) catering (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/10/2007	Payee name Mark Thomas Real Estate Payee address; City; State; Zip Code 513 Main Street Suite 201 Fort Worth, TX 76102	Amount (\$) \$1,000.00
Purpose of payment (See instructions regarding type of information required.) rent (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/15/2007	Payee name Opinion Analysts Payee address; City; State; Zip Code 906 Rio Grande Street Austin, TX 78701	Amount (\$) \$5,250.00
Purpose of payment (See instructions regarding type of information required.) research (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 28/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/12/2007	5 Payee name Staples 6 Payee address; City; State; Zip Code 1660 S. University Drive Fort Worth, TX 76107	7 Amount (\$) \$16.54
8 Purpose of payment (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/12/2007	Payee name Staples Payee address; City; State; Zip Code 1660 S. University Drive Fort Worth, TX 76107	Amount (\$) \$102.83
Purpose of payment (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/17/2007	Payee name Staples Payee address; City; State; Zip Code 1660 S. University Drive Fort Worth, TX 76107	Amount (\$) \$146.13
Purpose of payment (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/26/2007	Payee name Staples Payee address; City; State; Zip Code 1660 S. University Drive Fort Worth, TX 76107	Amount (\$) \$21.41
Purpose of payment (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 29/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/19/2007	5 Payee name Sustatia, Francine (Mrs.) 6 Payee address; City; State; Zip Code 2500 Goldenrod Fort Worth, TX 76111	7 Amount (\$) \$875.00
8 Purpose of payment (See instructions regarding type of information required.) photographs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/17/2007	Payee name The Tyson Organization Payee address; City; State; Zip Code 1000 Macon Street Fort Worth, TX 76102	Amount (\$) \$2,695.32
Purpose of payment (See instructions regarding type of information required.) voter contact (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/18/2007	Payee name The Tyson Organization Payee address; City; State; Zip Code 1000 Macon Street Fort Worth, TX 76102	Amount (\$) \$428.89
Purpose of payment (See instructions regarding type of information required.) voter contact (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/25/2007	Payee name The Tyson Organization Payee address; City; State; Zip Code 1000 Macon Street Fort Worth, TX 76102	Amount (\$) \$1,082.91
Purpose of payment (See instructions regarding type of information required.) voter contact (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/6 Report: 30/30
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999
4 Date 10/05/2007	5 Payee name US Postal Service 6 Payee address; City; State; Zip Code 8th Avenue Station Fort Worth, TX 76110	7 Amount (\$) \$328.00
8 Purpose of payment (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/11/2007	Payee name US Postal Service Payee address; City; State; Zip Code 8th Avenue Station Fort Worth, TX 76110	Amount (\$) \$41.00
Purpose of payment (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/15/2007	Payee name US Postal Service Payee address; City; State; Zip Code 8th Avenue Station Fort Worth, TX 76110	Amount (\$) \$41.00
Purpose of payment (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 10/24/2007	Payee name US Postal Service Payee address; City; State; Zip Code 8th Avenue Station Fort Worth, TX 76110	Amount (\$) \$410.00
Purpose of payment (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held: