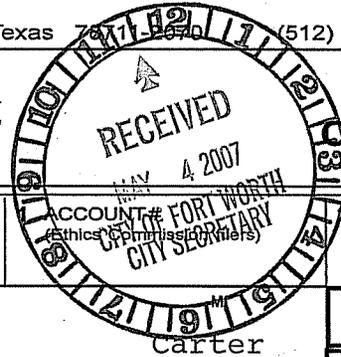


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1



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

Total pages filed:

36

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST LAST SUFFIX
Mr. Hugh Carter
NICKNAME LAST SUFFIX
Burdette

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
 Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
4717 Lafayette Avenue
Fort Worth, Texas 76107

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TEX

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 877-2834

Receipt # Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI LAST SUFFIX
Mr. Hugh Carter
NICKNAME LAST SUFFIX
Burdette

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4717 Lafayette Avenue
Fort Worth, Texas 76107

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 877-2834

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
04 / 03 / 07 THROUGH 05 / 02 / 07

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
05 / 12 / 07

12 OFFICE

OFFICE HELD (if any)
City Council, District 7

13 OFFICE SOUGHT (if known)
City Council, District 7

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
H. Carter Burdette

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

** 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. **

18 CONTRIBUTION 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)	\$ 42,330.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 28,258.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 39,559.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

JUDY ANN KARDARAS
Notary Public
STATE OF TEXAS
My Comm. Exp. 11/30/2008

H. Carter Burdette
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said H. Carter Burdette, this the 3rd day of May, 2007, to certify which, witness my hand and seal of office.

Judy Ann Kardaras
Signature of officer administering oath

Judy Ann Kardaras, Notary Public, Texas
Printed name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <div style="text-align: right; font-size: 1.2em;">41</div>	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/7/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James R. Toal 6 Contributor address; City; State; Zip Code 341 Nursery Lane Fort Worth, Texas 76114-4336	7 Amount of contribution (\$) \$1,000 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Bailey, Jr. Contributor address; City; State; Zip Code P.O. Box 510 Fort Worth, Texas 76101	Amount of contribution (\$) \$ 250 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James W. Schell Contributor address; City; State; Zip Code 901 Fort Worth Club Building Fort Worth, Texas 76102	Amount of contribution (\$) \$ 500 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike & Marty Craddock Contributor address; City; State; Zip Code 4904 Dexter Fort Worth, Texas 76107	Amount of contribution (\$) \$ 200 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. James N. Patterson Contributor address; City; State; Zip Code 809 Scarlet Sage Court Fort Worth, Texas 76112-1710	Amount of contribution (\$) \$ 25 <small>(If travel outside of Texas, complete Schedule T)</small>	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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/9/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. Thomas A. Leavens	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3839 South Hills Drive Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil E. Munn	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1725 Hulen Street Fort Worth, Texas 76107-3828			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John Stevenson	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1207 Hillcrest Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. Robert J. Turner	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5220 Byers Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. J.T. Ward, Jr.	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3601 Monticello Drive Fort Worth, Texas 76107			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/9/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee B. Freese	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, Texas 76109			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. S. Meihaus	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4705 Harley Avenue Fort Worth, Texas 76107-3713			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert L. Penn	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1701 Carlton Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. W. L. Hughes, Jr.	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1809 Woods Drive Arlington, Texas 76010			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. Robert W. Brown	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4100 Clarke Avenue Fort Worth, Texas 76107-2407			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/9/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha V. Leonard	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1411 Shady Oaks Lane Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Bert Honea, Jr.	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4201 Harley Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John Cranz	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 470037 Fort Worth, Texas 76147			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. William W. Meadows	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3904 Hamilton Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sallie B. Tarride	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6309 Pamlico Road Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed Pigman, Jr. 6 Contributor address; City; State; Zip Code 200 Texas Way Fort Worth, Texas 76106-2782	7 Amount of contribution (\$) \$250 (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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Pace Contributor address; City; State; Zip Code 6307 Rosemont Avenue Fort Worth, Texas 76116	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. James R. Blake Contributor address; City; State; Zip Code 19 Westover Road Fort Worth, Texas 76107	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Burr F. Fairlane Contributor address; City; State; Zip Code 4820 Bryce Avenue Fort Worth, Texas 76107	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben J. Fortson Contributor address; City; State; Zip Code 301 Commerce Street, Suite 3301 Fort Worth, Texas 76102	Amount of contribution (\$) \$1,000 (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

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John Paul Kinzey	7 Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 9830 Fort Worth, Texas 76147			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Ralph Cox	Amount of contribution (\$) \$200 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 200 Rivercrest Drive Fort Worth, Texas 76107-1650			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John H. Maddux	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2120 Ridgmar Boulevard, Suite 14 Fort Worth, Texas 76116-2200			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann T. Sutherland	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1721 Hulen Street Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann S. Kimbrough	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5054 Birchman Avenue Fort Worth, Texas 76107-4846			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John H. Williams 6 Contributor address; City; State; Zip Code 4737 Lafayette Avenue Fort Worth, Texas 76107-3723	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Wentworth Contributor address; City; State; Zip Code 1513 Catalina Drive Fort Worth, Texas 76107-3229	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trinity Bluff Development Ltd. Contributor address; City; State; Zip Code 2801 Bledsoe Street Fort Worth, Texas 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)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy B. Lawrence Contributor address; City; State; Zip Code 2115 Mount Royal Terrace Fort Worth, Texas 76107	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. David Tracy Contributor address; City; State; Zip Code 2734 Colonial Parkway Fort Worth, Texas 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)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest E. Horn	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 819 Penn Street Fort Worth, Texas 76102			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gale A. Cupp	Amount of contribution (\$) \$ 75 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9225 Heron Drive Fort Worth, Texas 76108			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K. D. McKenzie, Jr.	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1600 W. 7th Street, Suite 100 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard O. Fish	Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8909 Crosswind Drive Fort Worth, Texas 76179			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy Needham	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5328 Collinwood Avenue Fort Worth, Texas 76107			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Purvis	7 Amount of contribution (\$) \$250	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4121 Rowan Drive Fort Worth, Texas 76116		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Allen Baird	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6120 Plum Valley Place Fort Worth, Texas 76116		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall C. Gideon	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3812 Monticello Drive Fort Worth, Texas 76107		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe R. Thompson	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4809 Brockton Court Fort Worth, Texas 76132		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vivienne Wilson	Amount of contribution (\$) \$100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3200 Fairfield Avenue Fort Worth, Texas 76116		(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

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Wysong	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 924 Roaring Springs Fort Worth, Texas 76114-4453			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carolyn A. Hardgrove	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5520 El Campo Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald L. Parrish	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1419 Thomas Place Fort Worth, Texas 76107-2431			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan Parker	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2901 Riverhollow Court Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S.G. Johndroe, III	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 801 Cherry Street, Suite 2100 Fort Worth, Texas 76102			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breck Ray 6 Contributor address; City; State; Zip Code 1401 Thomas Place Fort Worth, Texas 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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William B. Scroggie Contributor address; City; State; Zip Code 1108 S. Henderson Fort Worth, Texas 76104	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert E. Sweeney Contributor address; City; State; Zip Code P.O. Box 1921 Fort Worth, Texas 76101	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindy Hudson Contributor address; City; State; Zip Code 5905 El Campo Fort Worth, Texas 76107-4643	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 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. R. Williams Contributor address; City; State; Zip Code P.O. Box 470473 Fort Worth, Texas 76147-0473	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)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula Cioffi	7 Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5505 Byers Avenue Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Dennis E. Ward	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6332 Halifax Road Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annette Blaschke	Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4629 Collinwood Avenue Fort Worth, Texas 76107-4160			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E. Anne Holland	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 509 Eastwood Avenue Fort Worth, Texas 76107-1017			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. B. J. Crow	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5829 Rockridge Court Fort Worth, Texas 76132-2607			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/11/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L. Daniel Prescott	7 Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1800 Western Avenue Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. Robert Capper	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 48 Valley Ridge Road Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lander Irwin	Amount of contribution (\$) \$ 30 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8019 Meadowvale Houston, Texas 77063			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrs. W. K. Gordon, Jr.	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1100 Broad Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Y. Harvey	Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6001 Lovell Avenue Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archie Davenport, Jr. 6 Contributor address; City; State; Zip Code 4008 Clarke Avenue Fort Worth, Texas 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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford S. Barnes Contributor address; City; State; Zip Code 4450 Harley Avenue Fort Worth, Texas 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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivia G. Mason Contributor address; City; State; Zip Code 4738 Harley Avenue Fort Worth, Texas 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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles L. Geren Contributor address; City; State; Zip Code P.O. Box 1440 Fort Worth, Texas 76101	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F. S. Gunn Contributor address; City; State; Zip Code 3909 Ann Arbor Court Fort Worth, Texas 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

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice Tilley	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 201 Main Street, Suite 2200 Fort Worth, Texas 76102-3126			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelia C. Friedman	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1305 Shady Oaks Lane Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Ryan	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 333 Rivercrest Drive Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond B. Kelly III	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 301 Virginia Place Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Harry N. Ward	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4809 Harley Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. Robb H. Rutledge 6 Contributor address; City; State; Zip Code 5300 El Dorado Fort Worth, Texas 76107	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Gary W. Havener Contributor address; City; State; Zip Code P.O. Box 121969 Fort Worth, Texas 76121-1969	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth M. Brown Contributor address; City; State; Zip Code 4609 Washburn Fort Worth, Texas 76107-3720	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Gordon Appleman Contributor address; City; State; Zip Code 801 Cherry Street, Suite 1600 Fort Worth, Texas 76102	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sergio L. DeLeon Contributor address; City; State; Zip Code 4521 Diaz Avenue Fort Worth, Texas 76107	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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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judith S. Nowlin 6 Contributor address; City; State; Zip Code 2124 Highland Park West Fort Worth, Texas 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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxine Kemble Contributor address; City; State; Zip Code 2003 Highland Oaks Fort Worth, Texas 76107	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwin S. Ryan Contributor address; City; State; Zip Code 500 W. 13th Street Fort Worth, TEXAS 76102	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Bourkee Harvey Contributor address; City; State; Zip Code 4616 Ridgehaven Court Fort Worth, Texas 76116	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles M. Simmons Contributor address; City; State; Zip Code 1120 Shady Oaks Lane Fort Worth, Texas 76107	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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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Timothy L. Petrus 6 Contributor address; City; State; Zip Code 3736 Country Club Circle Fort Worth, Texas 76109	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John C. Snyder Contributor address; City; State; Zip Code 201 Main Street, Suite 1454 Fort Worth, Texas 76102	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Don Williamson Contributor address; City; State; Zip Code 1300 So. University Drive, Suite 410 Fort Worth, Texas 7610	Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Larry Kardaras Contributor address; City; State; Zip Code 8409 Doreen Fort Worth, Texas 76116	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 4/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G. M. Lasater Contributor address; City; State; Zip Code 3815 Lisbon Street, Suite 203 Fort Worth, Texas 76107	Amount of contribution (\$) \$1,000 (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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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/12/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priscilla Johnson 6 Contributor address; City; State; Zip Code 3575 Hamilton Avenue Fort Worth, Texas 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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James F. Beckman Contributor address; City; State; Zip Code 3116 W. 6th Street, Suite 200 Fort Worth, Texas 76107=2712	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gail Rawl Contributor address; City; State; Zip Code 6128 Indian Creek Drive Fort Worth, Texas 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)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee J. Kelly, Jr. Contributor address; City; State; Zip Code 417 Rivercrest Drive Fort Worth, Texas 76107	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John M. Hogg Contributor address; City; State; Zip Code 201 Main Street, Suite 700 Fort Worth, Texas 76102	Amount of contribution (\$) \$1,000 (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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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/13/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Pace Sykes	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2000 Spanish Trail Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Terrance M. Wright	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1605 Ashland Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Kelly Ryan	Amount of contribution (\$) \$ 10 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 307 W. 7th Street, Suite 1705 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph M. Waller	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 136547 Fort Worth, Texas 76136			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Thomas C. Sturdivant	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2840 Manorwood Terrace Fort Worth, Texas 76109-5558			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/13/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Leroy Baldwin 6 Contributor address; City; State; Zip Code 2921 Lake Como Drive Fort Worth, Texas 76107-5109	7 Amount of contribution (\$) \$ 25 (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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arch B. Gilbert Contributor address; City; State; Zip Code 3221 Hulen Street, Suite C Fort Worth, Texas 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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelby L. Schafer Contributor address; City; State; Zip Code 256 Casa Blanca Street Fort Worth, Texas 76107-1859	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia H. Schutts Contributor address; City; State; Zip Code 4701 Washburn Avenue Fort Worth, Texas 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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff L. Fraley Contributor address; City; State; Zip Code 3200 W. 4th Street Fort Worth, Texas 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)	

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/13/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. J.L. Milligan 6 Contributor address; City; State; Zip Code 6374 Lansdale Drive Fort Worth, Texas 76107	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert W. Leonard, Jr. Contributor address; City; State; Zip Code P.O. Box 1718 Fort Worth, Texas 76101	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Garrett Contributor address; City; State; Zip Code 6100 Southwest Boulevard, Suite 250 Fort Worth, Texas 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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James R. Dunaway Contributor address; City; State; Zip Code 777 Taylor Street, Suite 1040 Fort Worth, Texas 76102-4910	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 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter L. Philpot Contributor address; City; State; Zip Code 1501 Westover Lane Fort Worth, Texas 76107	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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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/13/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John B. McClane	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3862 Candlelite Lane Fort Worth, Texas 76109			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Smith	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 612 Roaring Springs Road Fort Worth, Texas 76114-4402			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. & Mrs. D. E. Teitelbaum	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4723 Lafayette Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Jean Taylor	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4729 Harley Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freese & Nichols PAC	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Frank Kinsel, Jr.	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3809 Hollow Creek Fort Worth, Texas 76116			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John C. Goff	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 777 Main Street, Suite 2100 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I. Jon Brumley	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 777 Main Street, Suite 3200 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry R. Montesi	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 301 Commerce Street, Suite 3635 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William E. Bailey	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 510 Fort Worth, Texas 76101-0510			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad Schmid 6 Contributor address; City; State; Zip Code P.O. Box 9438 Fort Worth, Texas 76147-2438	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sally P. Mooring Contributor address; City; State; Zip Code 2308 Winton Terrace East Fort Worth, Texas 76109-1154	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Jerry K. Hendrix Contributor address; City; State; Zip Code 4022 Modlin Fort Worth, Texas 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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. William Greenhill Contributor address; City; State; Zip Code 1608 Ashland Avenue Fort Worth, Texas 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)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Rafael E. Garza Contributor address; City; State; Zip Code 5321 Northcrest Road Fort Worth, Texas 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)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Martin C. Bowen	7 Amount of contribution (\$) \$ 250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1120 Hidden Road Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald R. Norman	Amount of contribution (\$) \$ 250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6300 Ridglea Place, Suite 900 Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Warren Shipman	Amount of contribution (\$) \$ 500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4540 Overton Terrace Court Fort Worth, Texas 76109			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leland A. Hodges	Amount of contribution (\$) \$ 250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 115 W. 7th Street, Suite 1310 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G. Malcolm Louden	Amount of contribution (\$) \$ 2,500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 W. 7th Street, Suite 1007 Fort Worth, Texas 76102-4773			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John H. James	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1617 Western Avenue Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elton M. Hyder III	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9005 Fort Worth, Texas 76147			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Brian Roop	Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2905 Woodland Hills Drive Grapevine, Texas 76051			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Brackett, Flores, Utt & Burns, J.V.	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 307 W. 7th Street, Suite 1225 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinda R. Medary	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5020 Bryce Avenue Fort Worth, Texas 76107-3610			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernell Sturns	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 612 Highwoods Terrace Fort Worth, Texas 75112			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard L. Griffith	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6332 Curzon Fort Worth, Texas 76116-4604			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William K. Young	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1320 So.University Drive, Suite 400 Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Preston Geren	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4200 So. Hulen, Suite 619 Fort Worth, Texas 76109			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alann B. Sampson	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4809 Lafayette Avenue Fort Worth, Texas 76107-3725			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John W. McMackin 6 Contributor address; City; State; Zip Code 801 Cherry Street, Unit 46 Fort Worth, Texas 76102	7 Amount of contribution (\$) \$250 (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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Leonard Contributor address; City; State; Zip Code P.O. Box 1718 Fort Worth, Texas 76101	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anonymous Contributor address; City; State; Zip Code	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. W. C. Bahan Contributor address; City; State; Zip Code 29 Valley Ridge Road Fort Worth, Texas 76107-3112	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos M. Delatorre Contributor address; City; State; Zip Code 2300 Autumn Oaks Trail Arlington, Texas 76006	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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanc D'Ivoire, Inc. 6 Contributor address; City; State; Zip Code 2419 Minnis Drive, Suite 250 Haltom City, Texas 76117-4843	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Thomas F. Darden Contributor address; City; State; Zip Code 777 West Rosedale, Suite 300 Fort Worth, Texas 76104	Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Chowning Contributor address; City; State; Zip Code 3809 Crestline Road Fort Worth, Texas 76107-3335	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. J. Alan Davis Contributor address; City; State; Zip Code 4901 Lafayette Avenue Fort Worth, Texas 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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Thomas Szymanski Contributor address; City; State; Zip Code 10647 Verna Trail West Fort Worth, Texas 76108	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)	

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**POLITICAL CONTRIBUTIONS
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SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT# (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Dennis P. Shingleton	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8600 Crosswind Drive Fort Worth, Texas 76179			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Cutler	Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 65 Westover Terrace Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John M. Stevenson	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1207 Hillcrest Street Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew E. Swartzfager	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3807 Lafayette Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Jo Nial	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1909 Belle Place Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. J. Walker Holland 6 Contributor address; City; State; Zip Code 120 Williamsburg Lane Fort Worth, Texas 76107	7 Amount of contribution (\$) \$200 (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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Ward Contributor address; City; State; Zip Code 3611 Watonga Fort Worth, Texas 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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christina Patoski Contributor address; City; State; Zip Code 4325 Lovell Avenue Fort Worth, Texas 76107-54122	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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzie Williams Contributor address; City; State; Zip Code 5404 El Campo Avenue Fort Worth, Texas 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 4/16/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant Jackson Contributor address; City; State; Zip Code 853 Bridle Avenue Fort Worth, Texas 76108-1035	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)	

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/16/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Brown	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1704 Tremont Avenue Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Andy Thompson	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9557 Fort Worth, Texas 76147-0557			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker C. Friedman	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 421 Ridgewood Court Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftin V. Witcher	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3991 W. Vickery Boulevard Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W. A. Hudson II	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 616 Texas Street Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/18/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy W. McKinney 6 Contributor address; City; State; Zip Code 1509 Northcrest Court Fort Worth, Texas 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 4/18/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John V. Roach II Contributor address; City; State; Zip Code 2805 Alton Road Fort Worth, Texas 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 4/18/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorothy Berry Contributor address; City; State; Zip Code 2007 Highland Oaks Street Fort Worth, Texas 76107	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 4/18/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James A. Davidson Contributor address; City; State; Zip Code 3617 Hamilton Avenue Fort Worth, Texas 76107-1703	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 4/18/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael G. Applemann Contributor address; City; State; Zip Code 801 Cherry Street, Suite 2100 Fort Worth, Texas 76102	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)	

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/18/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane G. Molphus 6 Contributor address; City; State; Zip Code 529 Athena Drive Fort Worth, Texas 76114	7 Amount of contribution (\$) \$ 25 (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 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chesapeake Energy Corp., Federal PAC Contributor address; City; State; Zip Code P.O. Box 18576 Oklahoma City, Oklahoma 73159	Amount of contribution (\$) \$700 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W. J. Wietholter Contributor address; City; State; Zip Code 3706 Crestline Road Fort Worth, Texas 76107	Amount of contribution (\$) \$ 40 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne W. Marion Contributor address; City; State; Zip Code Burnette Plaza, Suite 1500 Fort Worth, Texas 76102-6881	Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pallik & Associates, L.P. Contributor address; City; State; Zip Code 115 W. 2nd Street, Suite 210 Fort Worth, Texas 76102	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)	

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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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/23/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert B. P. Dupree	7 Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 100 Crescent Court, Suite 1500 Dallas, Texas 75201			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward R. Hudson, Jr.	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 616 Texas Street Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. J. D. Ambrose	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 407 Eastwood Avenue Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard F. Garvey	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9600 Fort Worth, Texas 76147-2600			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan E. Fersing	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5900 El Campo Avenue Fort Worth, Texas 76107			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/23/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffrey H. Kobs 6 Contributor address; City; State; Zip Code 5900 El Campo Avenue Fort Worth, Texas 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 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. E. Rogers III Contributor address; City; State; Zip Code 7808 Vinca Circle Fort Worth, Texas 76135	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 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. Foster Nelson Contributor address; City; State; Zip Code 5021 Bryce Avenue Fort Worth, Texas 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)	
Date 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. R. French Contributor address; City; State; Zip Code 1320 So. University Drive Fort Worth, Texas 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 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conservative Voters Forum Contributor address; City; State; Zip Code 3501 Elm Creek Court Fort Worth, TEXAS 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)	

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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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/23/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydn H. Cutler, Jr. 6 Contributor address; City; State; Zip Code 3825 Camp Bowie Boulevard Fort Worth, Texas 76107	7 Amount of contribution (\$) \$1,000 (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 4/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson D. Lewis Contributor address; City; State; Zip Code 4016 Shorefront Drive Fort Worth, Texas 76135	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 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caroline M. Dulle Contributor address; City; State; Zip Code 1217 Clover Lane Fort Worth, Texas 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 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janna S. Poland Contributor address; City; State; Zip Code P.O. Box 121877 Fort Worth, Texas 76121	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 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. B. J. Zimmerman Contributor address; City; State; Zip Code 908 Roaring Springs Road Fort Worth, Texas 76114-4453	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)	

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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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/27/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Carl R. Brumley	7 Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4801 Washburn Avenue Fort Worth, Texas 76107			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley F. Garvey Trust	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9800 Fort Worth, Texas 76147-2000			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. John F. Gray	Amount of contribution (\$) \$ 25 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6475 Crestmore Road Fort Worth, Texas 76116			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Moncrief Campaign	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen M. O'Rourke	Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5529 Byers Avenue Fort Worth, Texas 76106-3114			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/27/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Blanton	7 Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8805 Royal Harbor Court Fort Worth, Texas 76179			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/27/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay Granger Campaign Fund	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 715 Jones Street, Suite 101 Fort Worth, Texas 76102			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/30/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. & Mrs. Gary W. Cumbie	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 400 Willow Ridge Road Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/30/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olive B. Pelich	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1220 Thomas Place Fort Worth, Texas 76107			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/30/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan B. Blair	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5517 Byers Avenue Fort Worth, Texas 76107-3114			
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:	
2 FILER NAME H. Carter Burdette		3 ACCOUNT# (Ethics Commission filers)	
4 Date 4/30/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lou Ann Blaylock	7 Amount of contribution (\$) \$ 50 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 777 Taylor Street, Penthouse II Fort Worth, Texas 76102			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/30/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William A. Massad	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 15 Westover Road Fort Worth, Texas 76107-3104			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

LOANS	SCHEDULE E
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule E:
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2 FILER NAME H. Carter Burdette	3 ACCOUNT # (Ethics Commission filers)
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4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒	\$
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5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) N/A	9 Loan Amount (\$)
6 Is lender a financial Institution? Y N	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date

12 Principal occupation / Job title (See Instructions)	13 Employer (See Instructions)
---	---------------------------------------

14 Description of Collateral <input type="checkbox"/> none
--

15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	16 Name of guarantor 17 Guarantor address; City; State; Zip Code	18 Amount Guaranteed (\$)
--	--	----------------------------------

19 Principal Occupation	20 Employer
--------------------------------	--------------------

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Description of Collateral <input type="checkbox"/> none
--

GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
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Principal Occupation	Employer
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.
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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 3
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)
4 Date 4/3/07	5 Payee name The Eppstein Group <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 4405 International Plaza Fort Worth, Texas 76109	7 Amount (\$) \$20,000.00
8 Purpose of payment (See instructions regarding type of information required.) Retainer fee (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 4/9/07	Payee name Carter Burdette <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 4717 Lafayette Avenue Fort Worth, Texas 76107	Amount (\$) \$ 108.79
Purpose of payment (See instructions regarding type of information required.) Reimburse for campaign stamps and supplies (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 4/9/07	Payee name The Eppstein Group <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 4405 International Plaza Fort Worth, Texas 76109	Amount (\$) \$ 1,163.72
Purpose of payment (See instructions regarding type of information required.) Printing, postage, etc. (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 4/15/07	Payee name Dewayne Goings <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code	Amount (\$) \$ 100.00
Purpose of payment (See instructions regarding type of information required.) Campaign Rally Security (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:
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)
4 Date 4/15/07	5 Payee name The Eppstein Group 6 Payee address; City; State; Zip Code 4405 International Plaza Fort Worth, Texas 76109	7 Amount (\$) \$ 280.37
8 Purpose of payment (See instructions regarding type of information required.) Campaign Stationery (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 4/15/07	Payee name Carter Burdette Payee address; City; State; Zip Code 4717 Lafayette Avenue Fort Worth, Texas 76107	Amount (\$) \$ 89.37
Purpose of payment (See instructions regarding type of information required.) Reimbursement for Yard Sign Stakes (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 4/23/07	Payee name The Eppstein Group Payee address; City; State; Zip Code 4405 International Plaza Fort Worth, Texas 76109	Amount (\$) \$3,337.32
Purpose of payment (See instructions regarding type of information required.) Printing for campaign signs (If travel outside of Texas, complete Schedule T)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 4/23/07	Payee name Carter Burdette Payee address; City; State; Zip Code 4717 Lafayette Avenue Fort Worth, Texas 76107	Amount (\$) \$ 96.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for campaign stamps and sign ties (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:
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)
4 Date 4/26/07	5 Payee name Cingular Wireless 6 Payee address; City; State; Zip Code P.O. Box 650553 Dallas, Texas 75265	7 Amount (\$) \$ 48.59
8 Purpose of payment (See instructions regarding type of information required.) Cell Phone Service (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 4/28/07	Payee name Railhead Smokehouse 6 Payee address; City; State; Zip Code 2900 Montgomery Street Fort Worth, Texas 76107	Amount (\$) \$ 2,706.25
Purpose of payment (See instructions regarding type of information required.) Campaign Reception (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 4/30/07	Payee name Mike Moncrief Campaign 6 Payee address; City; State; Zip Code 777 W. 7th Street Fort Worth, Texas 76102	Amount (\$) \$ 250.00
Purpose of payment (See instructions regarding type of information required.) Campaign Contribution (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 4/23/07	Payee name United States Postal Service 6 Payee address; City; State; Zip Code 3301 Darcy Street Fort Worth, Texas 76107	Amount (\$) \$ 78.00
Purpose of payment (See instructions regarding type of information required.) Campaign Stamps (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 MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G:

2 FILER NAME
H. Carter Burdette 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name N/A <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 7 Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	8 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
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Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
------	--	---

Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
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PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	SCHEDULE H
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule H:
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2 FILER NAME H. Carter Burdette	3 ACCOUNT # (Ethics Commission filers)
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4 Date	5 Business name N/A	7 Amount (\$)
6 Business address; City; State; Zip Code		

8 Purpose of payment (See instructions regarding type of information required.) (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	Business name Business address; City; State; Zip Code	Amount (\$)
------	--	-------------

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
--	--

Date	Business name Business address; City; State; Zip Code	Amount (\$)
------	--	-------------

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
--	--

Date	Business name Business address; City; State; Zip Code	Amount (\$)
------	--	-------------

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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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.		1 Total pages Schedule I:
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name N/A <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount (\$)
Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount (\$)
Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount (\$)
Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount (\$)
Date	Payee name <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount (\$)

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CREDITS (optional)

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

2 FILER NAME
H. Carter Burdette

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payor name N/A	8 Amount (\$)
	6 Payor address; City; State; Zip Code	
	7 Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
	Reason for credit	

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IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T:
2 FILER NAME H. Carter Burdette		3 ACCOUNT # (Ethics Commission filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee N/A		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
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Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
** Complete only if "Report Type" on page 1 is marked "Final Report" **

1 C/OH NAME H. Carter Burdette	2 ACCOUNT # (Ethics Commission filers)
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3 SIGNATURE

N/A

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER
** Complete A & B below *only* if you are not an officeholder. **

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER
** Complete this section *only* if you are an officeholder **

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder