Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

RECEIVED
APR 12 2007
CITY OF FORT WORTH
CITY SECRETARY

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

1 CASE CODE (Ethics Commission filers)

2 Total pages filed: 19

OFFICE USE ONLY

Date Received

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TEX

Date Hand-delivered or Date Postmarked

Receipt #	Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST | MI

NICKNAME | LAST | SUFFIX

CHUCK SILCOX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

4221 SELKIRK DR. West
FORT WORTH, Tx 76109

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(817) 925-2006

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI

SAME

NICKNAME | LAST | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

SAME

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

( ) SAME

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

01 / 15 / 07 — 4 / 12 / 07

11 ELECTION

ELECTION DATE: Month Day Year

4 / 12 / 07

ELECTION TYPE

☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

FW CITY Council_Dist. 3

13 OFFICE SOUGHT (if known)

same

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

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

☐ additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 34,800.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
4.	**TOTAL POLITICAL EXPENDITURES**	$

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 110,436.66

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
RONALD P. GONZALES
MY COMMISSION EXPIRES
May 17, 2008

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Chuck Silcox
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Chuck Silcox, this the 12th day of April, 20 07, to certify which, witness my hand and seal of office.

Ronald P. Gonzales — Signature of officer administering oath

Ronald P. Gonzales — Printed name of officer administering oath

Notary — Title of officer administering oath

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

34,800.

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
2/28/07	K-PAC 201 main St, Ste 2500 Fort Worth, Tx 76102	500.00			
2/28/07	PSEL PAC 201 main St, Ste 2500 FW, Tx 76102	500.00			
2/28/07	Good Government Fund FORT WORTH, TX 76102	500.00			
3-1-07	Patricia Purvis 4121 ROWAN DR. FW, Tx 76116	100.00			
2/28/07	RONNIE A. LONG 6004 Airport Fwy FW, Tx 76117-5703	100.00			

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____)	**8** Amount of pledge ($)	**9** In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions)		**11** Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
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		(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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1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-1-07	WILL A. COURTNEY PO Box 121488 FW, Tx 76121	100.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-6-07	Hammer & Nails Club 6464 Brentwood Stair Rd #100 FW, Tx 76112	250.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Perdue, Brackett, Flores, Utt Burns 307 W. 7th ste 1225 FW, Tx 76102-5116	JV 500 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Jim & Quida Bradshaw	350 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-2-07	M/M John V. Roach II 2805 Alton Rd FW, Tx 76109	50 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)
			(If travel outside of Texas, complete Schedule T)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
			(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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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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1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-7-07	DAVID FLORES 1512 8th Ave, Ste 800 FW, Tx 76104-4152	1000.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-5-07	FREESE & NICHOLS PAC FW, Tx 76109	250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-6-07	CHESAPEAKE ENERGY PAC P.O. BOX 18576 OKLAHOMA CITY, OK 73154	250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-21-07	TEXAS PROGRESS FUND 801 Cherry St Unit 9 Ste 1500 FW, Tx 76102-6881	1000.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-07	JIM LANE 304 W. Central Ave FW, Tx 76106	250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

SCHEDULE B

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1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____)	8 Amount of pledge ($)	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
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	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-1-07	JOE PACE 6307 Rosemont Ave FW, TX 76116	200.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	FRED PARKER 7051 ALLEN PLACE FW, TX 76116	150.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Don & Wanda Woodard 3921 STONEHENGE Rd. FW, Tx 76109	200.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-5-07	RALPH H. DUGGINS 4209 RIDGEHAVEN Ct. FW, Tx 76116	500.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	DEANNA G. BAKER 6805 SPRINGHILL RD. FW, Tx 76116	150.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

SCHEDULE B

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1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)
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Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)
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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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3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-5-07	GUS BATES 3404 PARK HOLLOW FW, TX 76109	50 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	DAVID PETTIT 2209 IRWIN Ave FW, TX 76110	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-07	Beverly & Larry BRANHAM 6487 Woodstock Rd FW, TX 76116-7339	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	Reed PIGMAN, JR 200 Texas Way FW, TX 76106-2782	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	Randall C. Gideon 3812 Monticello FW, TX 76107	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

SCHEDULE B

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10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

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	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
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	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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	Pledgor address; City; State; Zip Code		(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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1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-4-07	B. & M. Hardie 3612 Lawndale Ave FW, Tx 76133	50 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Larry G. Keilhey PO Box 2109 FW, Tx. 76113	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Timothy L. Scott 4421 TANQUERAY PL. FW, TX 76116	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-28-07	Jean M. Davis 4224 SELKIRK DR. W. FW, TX 76109	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Elizabeth Parmer 307 W. 7th St., Ste 1225 FW, TX 76102-5111	100 00	(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____)	8 Amount of pledge ($)	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-7-07	Ralph Swearingin 6890 Bluebonnet Ct. N Richland Hills, TX 76180	100 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Eleanor S. Hutcheson 3616 DRyden Rd. FW, TX. 76109	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	LW or TE Ellis 1205 Mistletoe DR. FW, Tx 76110	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	MICHAEL or Rita Utt 2901 6th Ave FW, Tx 76110	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	Anne B. COZART 4917 Circle Ridge DR. FW, Tx 76114-1903	50 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____)	8 Amount of pledge ($)	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-7-07	Margaret L. THOMAS 5005 COCKRELL FW. Tx 76133	100 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	ALBERT KOMATSU 602 Roaring Springs Rd FW, Tx 76114	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	James W. Schell 901 FW Club Bldg FW, Tx 76102	300 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	FW Firefighters Comm. (PAC) 417 N. Retta FW, Tx, 76111	2500 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-5-07	Gary E. Reynolds PO Box 370 Euless, Tx 76039	1000 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____)	**8** Amount of pledge ($)	**9** In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
10 Principal occupation / Job title (See Instructions)		**11** Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____)	Amount of pledge ($)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-6-07	Meto Miteff 4453 Crestline Rd FORT WORTH, TX 76107	1000 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-7-07	David Fielder 2305 Woodsong Trail Arl. Tx 76016	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-07	James N. Austin JR 2017 Teakwood Trice FORT WORTH, TX 76112-5430	50 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-5-07	Mike Sands 6387 Hilldale St. FW, Tx 76116	250 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-9-07	Jane Berberich 4304 CADIZ RD. FW, Tx 76133	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

2 FILER NAME: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____) / **7** Pledgor address; City; State; Zip Code	**8** Amount of pledge ($)	**9** In-kind description (if applicable)
2-28-07	K-PAC 201 Main St, Ste 2500 FORT WORTH, TX 76102		

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

(If travel outside of Texas, complete Schedule T)

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-2-07	J.D. Walker 6917 BAL LAKE DR FW Tx 76116	100 00			
3-2-07	Byron L. Keil 4101 Clayton Rd. E. FW, Tx 76116	100 00			
2-23-07	M/M Ramon Guajardo 4400 Northview Ct. Aledo, Tx 76008	300 00			
2-27-07	Holt Hickman PO Box 168 FW, Tx 76101	2000 00			
3-7-07	ACME BRICK — PAC 2821 W. 7th St. FW, Tx 76107	500 00			

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form	1. Page Number (Schedule A)
2. FILER NAME	3. ACCOUNTING (Reporting Period)

4. Date	5. Full name of contributor	6. Contributor address	7. Amount of contribution (A)	8. Additional contribution (description of contribution)
3-7-07	[illegible]	[illegible]	100.00	

(Attach additional Form, complete Schedule A)

9. Principal occupation / Job title (See instructions)	10. Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution (A)	In-kind contribution description (if applicable)
[illegible]	[illegible]	[illegible]	100.00	

(If more than 4 items, complete Schedule A)

Principal occupation / Job title (See instructions)	Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution (A)	In-kind contribution description (if applicable)
3-7-07	[illegible]	[illegible]	500.00	

(If more than 4 items, complete Schedule A)

Principal occupation / Job title (See instructions)	Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution (A)	In-kind contribution description (if applicable)
3-7-07	[illegible]	[illegible]	500.00	

(If more than 4 items, complete Schedule A)

Principal occupation / Job title (See instructions)	Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is not already PAC, please see instruction guide for additional reporting requirements

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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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-7-07	L. Allen Hodges III 115 W. 7th st, ste 1310 FW, Tx 76102	300.00	(If travel outside of Texas, complete Schedule T)		
3-6-07	Tilden L. Childs III 2421 Colonial PKWY FW Tx. 76109-1032	50.00	(If travel outside of Texas, complete Schedule T)		
3-8-07	W.A. Moncrief, JR. 950 Commerce St. FW Tx. 76102-5418	5000.00	(If travel outside of Texas, complete Schedule T)		
3-8-07	William T. Ellis 6932 Shadow Creek Ct FW, Tx. 76132	100.00	(If travel outside of Texas, complete Schedule T)		
3-7-07	Carlton White 3408 Clayton Rd. E. FW, Tx. 76116-7342	250.00	(If travel outside of Texas, complete Schedule T)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-9-07	Paul E. Andrews 3500 Elm Creek Ct FW, Tx 76109	100.00	(If travel outside of Texas, complete Schedule T)		
3-9-07	Darrell & Cathy Hirt 1201 Hillcrest FW, Tx. 76107	100.00	(If travel outside of Texas, complete Schedule T)		
3-12-07	Tim Woodard 3925 Stoneshire Ct FW, Tx 76179	2500.00	(If travel outside of Texas, complete Schedule T)		
3-12-07	Tx Rifle Assn PAC PO Box 413 GOLDTHWAITE, Tx 76844	250.00	(If travel outside of Texas, complete Schedule T)		
3-6-07	LINDA PAVLIK 115 W. 2nd St, Ste 210 FW, Tx 76102	250.00	(If travel outside of Texas, complete Schedule T)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

ADDITIONAL CONTRIBUTORS
OTHER THAN PLUMBERS OR LICENSES

SCHEDULE A

The Insurance Policy requires how to read this box

2. Policy Number	3. Policy Period
4. Insured's Name and Mailing Address	
5. Business Description	6. Insured's Business Phone
7. Type of Business: ☐ Individual ☐ Partnership ☐ Corporation ☐ Other	8. Audit Period: ☐ Annual ☐ Other
9. Classification	10. Premium Basis
11. Rate	12. Advance Premium
13. Premium for Nonowned Autos	14. Rate
15. Advance Premium	
16. Premium for Hired Autos	17. Rate
18. Advance Premium	
19. Total Advance Premium	
20. Remarks	

Date	Name and Address of Additional Insured	Description of Operations / Location / Vehicle / Special Conditions	Premium (Advance)

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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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-12-07	R. Denny Alexander 4200 S. Hulen St, #617 FW, Tx 76109	250 00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-23-07	Joseph M. Waller PO Box 136547 FW, Tx 76136	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-20-07	Carter-Burgess PAC FORT WORTH, Tx 76102	500 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-21-07	Edward P. Bass special 201 Main St. #2700 FW, Tx 76102	1000 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4.3-07	Robt & Marion McCollum 2128 Highland Park Cir W. FW, Tx 76107	25 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN RECIPIENTS OF LOANS

SCHEDULE A

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-15-07	J. Porter Rainwater 6667 Gascony Place FW, Tx. 76132	300 00	(If travel outside of Texas, complete Schedule T)		
3-23-07	Apt. Asso Tarrant Co PAC 6350 Baker Blvd FW, Tx. 76118-6219	1500 00	(If travel outside of Texas, complete Schedule T)		
3-9-07	Gwinda L. Burns PO Box 8704 FW, Tx 76124	100 00	(If travel outside of Texas, complete Schedule T)		
3-13-07	John A. Melcher 3906 Arlan Lane FW, Tx 76109	100 00	(If travel outside of Texas, complete Schedule T)		
3-14-07	Nathan W. McGrew IV 4900 Westridge, #2 FW, Tx 76116-8243	250 00	(If travel outside of Texas, complete Schedule T)		

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Cover page Schedule A

2 FILER NAME [illegible]

3 ACCOUNT # (Reconciliation)

4 Date	5 Full name of contributor	6 Contributor address	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-15-07	[illegible]	[illegible]	300.00	

(If Loan, outside of Texas, complete Schedule I)

9 Principal occupation / Job title (See instructions)	10 Employer (See instructions)

Date	Full name of contributor	Amount of contribution ($)	In-kind contribution description (if applicable)
3-23-07	[illegible]	150.00	

(If loan, outside of Texas, complete Schedule I)

Principal occupation / Job title (See instructions)	Employer (See instructions)

Date	Full name of contributor	Amount of contribution ($)	In-kind contribution description (if applicable)
3-4-07	[illegible]	100.00	

(If loan, outside of Texas, complete Schedule I)

Principal occupation / Job title (See instructions)	Employer (See instructions)

Date	Full name of contributor	Amount of contribution ($)	In-kind contribution description (if applicable)
3-13-07	[illegible]	100.00	

(If loan, outside of Texas, complete Schedule I)

Principal occupation / Job title (See instructions)	Employer (See instructions)

Date	Full name of contributor	Amount of contribution ($)	In-kind contribution description (if applicable)
3-14-07	[illegible]	250.00	

(If loan, outside of Texas, complete Schedule I)

Principal occupation / Job title (See instructions)	Employer (See instructions)

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Revised 11/09/2006

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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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-13-09	Carl V. Flores 8700 County Rd. 107 Grandview, Tx 76050-3246	100.00			
3.14.07	Eddie M. Lesok 4900 Westridge Ave, #1 FW, Tx. 76116	250.00			
3-10-07	Jack Jefferson 3924 LINKCREST DR. ALEDO, Tx 76008-3539	100.00			
3-11-07	John Stevenson 1207 Hillcrest St FW, Tx. 76107	100.00			
3-2-07	Thomas Murnane 6804 Benito Ct. FW, Tx 76126-2301	100.00			

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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: [illegible]

3 ACCOUNTS (from Contributor)

4 Date	5 Full name of contributor	6 Contributor address	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-13-07	[illegible]	[illegible]	100.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See instructions) | 10 Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution ($)	In-kind contribution description (if applicable)
3-14-07	[illegible]	[illegible]	250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) | Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution ($)	In-kind contribution description (if applicable)
3-10-07	[illegible]	[illegible]	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) | Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution ($)	In-kind contribution description (if applicable)
3-11-07	[illegible]	[illegible]	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) | Employer (See instructions)

Date	Full name of contributor	Contributor address	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-07	[illegible]	[illegible]	100.00	

(If travel outside of Texas, complete Schedule T)

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.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
3-7-07	Donna R. Parker 6312 Mesa Ridge DR. FW, Tx 76137	50.00			
3-9-07	Kathleen E. Conners 3763 Stoney Creek Ct FW, Tx 76116-9336	250.00			
3-29-07	Conserative Voters FORum 3501 Elm Creek Court FW Tx 76109	500.00			
3-9-07	Printice Gary 16304 Ranchita DR. Dallas, Tx 75248	500.00			
3-31-07	FW Retired Firefighters PAC 1617 Tierney Rd. FW, Tx. 76112	1000.00			

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form	4. Year-to-Date Sub-Sum
2. FILER NAME [illegible]	5. ACCOUNT [illegible]

4. Date	5. Full name of contributor	6. Amount of contribution	7. Amount of contribution (Sum)	8. Indicate contribution (if applicable)
3-7-07	[illegible]		[illegible]	

(If need additional Sheet, complete Schedule A)

9. Principal occupation / Job title (Use Instructions)	10. Employer (Use Instructions)

Date	Full name of contributor	Amount of contribution	Indicate contribution (if applicable)
3-9-07	[illegible]	[illegible]	

(If need additional Sheet, complete Schedule A)

Principal occupation / Job title (Use Instructions)	Employer (Use Instructions)

Date	Full name of contributor	Amount of contribution	Indicate contribution (if applicable)
3-14-07	[illegible]	[illegible]	

(If need additional Sheet, complete Schedule A)

Principal occupation / Job title (Use Instructions)	Employer (Use Instructions)

Date	Full name of contributor	Amount of contribution	Indicate contribution (if applicable)
3-31-07	[illegible]	[illegible]	

(If need additional Sheet, complete Schedule A)

Principal occupation / Job title (Use Instructions)	Employer (Use Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORMAT AS NEEDED

To contribute to a non-Hard PAC, please see instructions guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-12-07	R. David Kelly 5485 Beltline # 300 Dallas, Tx 75254	250 00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-9-07	Neal Hildebrandt 1070 Eagles Landing Blvd Oak Point, Tx 75068	250 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-5-07	Bill Collins 2733 Colonial Pkwy FW, Tx 76109-1212	500 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-28-07	Bruce W. Peden 3471 SAGECREST TERR. FW, Tx 76109	250 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4.2.07	Robert / Mary ZOLLARS 3131 McKinney Ave, #600 Dallas, Tx 75204	450 00	(If travel outside of Texas, complete Schedule T)
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 foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN ELECTIONS OR LOBBYING

SCHEDULE A

The Instructions for this schedule have changed. Please read them carefully.

Name

Address

Check if Amended

Check if Termination

Check if Change of Address

Check if Name Change

Check if Change in Officers

Check if Change in Purpose

Check if Change in Affiliated Committee

Check if Change in Treasurer

Check if Change in Custodian of Records

Check if Change in Depository

Check if Change in Solicitation Statement

Check if Change in Fundraising Representative

Check if Change in Bylaws

Check if Change in Dissolution Plan

Check if Change in Other Information

Check if Change in Other Information

Check if Change in Other Information

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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: CHUCK SILCOX

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-1-07	Gilmore Lauderdale 9945 Boat Club Rd FW, Tx. 76179	25.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-3-07	Patsy L. Cantrell 4954 FM 1187 Box 277 Cresson, Tx 76035	250.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-21-07	Bob Ellis 4253 Inwood Rd FW Tx 76109	50.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-27-07	James-Mary Alice Congdon 6413 Fianna Hills Dr. FW, Tx 76132	200.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T)

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 foradditional reporting requirements.

SCHEDULE A

PROPRIETARY INFORMATION
OTHER THAN PERSONAL OR LOANS

1. Name of Applicant

2. Other Names Used

3. Address of Applicant

4. Date of Birth

5. Social Security Number

6. Driver's License Number

7. Name of Employer

8. Address of Employer

9. Position

10. Length of Employment

11. Annual Salary

12. Other Income

13. Source of Other Income

14. Name of Bank

15. Address of Bank

16. Account Number

17. Name of Bank

18. Address of Bank

19. Account Number

20. Name of Bank

21. Address of Bank

22. Account Number

23. Name of Bank

24. Address of Bank

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34. Account Number

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93. Address of Bank

94. Account Number

95. Name of Bank

96. Address of Bank

97. Account Number

98. Name of Bank

99. Address of Bank

100. Account Number

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NECESSARY