

OFFICIAL RECORD
CITY OF FORT WORTH, TEX

CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00999999

2 PAGE #
1 of 18

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr. Joel Burns
NICKNAME LAST SUFFIX

OFFICE USE ONLY

Date Received
RECEIVED
JAN 17 2012
CITY OF FORT WORTH
CITY SECRETARY
Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 12663
Fort Worth, TX 76110

Change of Address

Receipt # Amount
Date Processed
Date Imaged

5 CAMPAIGN
TREASURER
NAME

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

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

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

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 371-1177

8 REPORT TYPE

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

9 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
07/01/2011 12/31/2011

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)
Fort Worth City Councilman
District 9

12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Burns, Joel (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00999999

15 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2,060.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 168.62

4. TOTAL POLITICAL EXPENDITURES \$ 37,958.47

CONTRIBUTION BALANCE

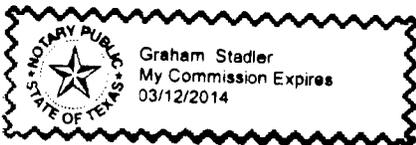
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 58,298.74

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Joel Burns
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joel Burns, this the 17th day of January, 20 12, to certify which, witness my hand and seal of office.

Graham Stadler
Signature of officer administering oath

GRAHAM STADLER
Print name of officer administering oath

PUBLIC NOTARY
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/18	
2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00999999	
4 Date 07/18/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clifford, Michael 6 Contributor address; City; State; Zip Code 115 Central Park W 14C New York, NY 10023-4198	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Private investor		10 Employer (See Instructions) N/A	
Date 08/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gandy, Taylor and Shirlee (Mr.) Contributor address; City; State; Zip Code 4250 Sarita Ct Fort Worth, TX 76109-4732	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self	
Date 10/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGuire, Daniel Contributor address; City; State; Zip Code 16 W 16th St Apt 12VN New York, NY 10011-6354	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Senior Project Manager		Employer (See Instructions) Marsh USA Inc	
Date 12/26/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pringle, Robert Contributor address; City; State; Zip Code 13 Shepard St Apt 5 Cambridge, MA 02138-1716	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions) Harvard University	
Date 07/30/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stammer, Louis Contributor address; City; State; Zip Code PO Box 6482 Columbus, OH 43206	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/18

2 FILER NAME Burns, Joel (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00999999

4 Date

09/03/2011

5 Full name of contributor out-of-state PAC (ID# _____)

Stammer, Louis

6 Contributor address; City; State; Zip Code

PO Box 6482
Columbus, OH 43206

7 Amount of
contribution (\$)

\$5.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/14 Report: 5/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 12/08/2011	5 Payee name Academy Sports and Outdoors		
6 Amount (\$) \$245.54	7 Payee address City; State; Zip Code 4800 Merida Avenue Fort Worth, TX 76115		

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sleeping bags for Councilmember Holiday Gifts
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/18/2011	Payee name AMM Political Strategies		
Amount (\$) \$12,690.89	Payee address City; State; Zip Code 507 N Sylvania Ave Fort Worth, TX 76111-2317		

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting- campaign management employee lease
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2011	Payee name AMM Political Strategies		
Amount (\$) \$12,690.89	Payee address City; State; Zip Code 507 N Sylvania Ave Fort Worth, TX 76111-2317		

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting- campaign management employee lease
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/30/2011	Payee name AMM Political Strategies		
Amount (\$) \$446.97	Payee address City; State; Zip Code 507 N Sylvania Ave Fort Worth, TX 76111-2317		

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political consulting expenses
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/14 Report: 6/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 09/16/2011	5 Payee name Ben Cohen Foundation
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 75 5th Street NW Suite 800 Atlanta, GA 30308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Charitable Dontrbution Anti Bullying Efforts
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/24/2011	Payee name Candlelight Christmas in Ryan Place
---------------------------	--

Amount (\$) \$200.00	Payee address City; State; Zip Code PO Box 11816 Fort Worth, TX 76110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement in Ryan Place Brochure
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/09/2011	Payee name Catholic Charities
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Amount (\$) \$100.00	Payee address City; State; Zip Code 249 W. Thornhill Drive Fort Worth, TX 76115
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation at Creating Hope for Our Community luncheon
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/08/2011	Payee name Costco
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Amount (\$) \$487.87	Payee address City; State; Zip Code 5300 Overton Ridge Blvd. Fort Worth, TX 76132
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Household items donated to help Fort Worth Police Department youth club family
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/14 Report: 7/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 07/11/2011	5 Payee name Dreamhost
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6 Amount (\$) \$9.95	7 Payee address City; State; Zip Code PMB #257 417 Associated Rd. Brea, CA 92821
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website host fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/09/2011	Payee name Dreamhost
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Amount (\$) \$9.95	Payee address City; State; Zip Code PMB #257 417 Associated Rd. Brea, CA 92821
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website host fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2011	Payee name Dreamhost
--------------------	-------------------------

Amount (\$) \$9.95	Payee address City; State; Zip Code PMB #257 417 Associated Rd. Brea, CA 92821
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website host fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 10/11/2011	Payee name Dreamhost
--------------------	-------------------------

Amount (\$) \$9.95	Payee address City; State; Zip Code PMB #257 417 Associated Rd. Brea, CA 92821
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website host fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/14 Report: 8/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 11/21/2011	5 Payee name Dreamhost
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6 Amount (\$) \$9.95	7 Payee address City; State; Zip Code PMB #257 417 Associated Rd. Brea, CA 92821
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website host fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/03/2011	Payee name Esperanza's Mexican Cafe
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Amount (\$) \$122.38	Payee address City; State; Zip Code 1601 Park Place Ave. Fort Worth, TX 76110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Breakfast Tacos for Tarrant County Pride Parade
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/27/2011	Payee name FedEx Corporation
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Amount (\$) \$38.36	Payee address City; State; Zip Code 109 N. Chandler Drive Fort Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Shipping costs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/27/2011	Payee name FedEx Corporation
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Amount (\$) \$61.90	Payee address City; State; Zip Code 109 N. Chandler Drive Fort Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Shipping costs
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/14 Report: 9/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 07/05/2011	5 Payee name First Data Merchant Services
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6 Amount (\$) \$24.13	7 Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/05/2011	Payee name First Data Merchant Services
---------------------------	---

Amount (\$) \$0.87	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/03/2011	Payee name First Data Merchant Services
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Amount (\$) \$29.05	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/03/2011	Payee name First Data Merchant Services
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Amount (\$) \$0.10	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
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Salaries/Wages/Contract Labor
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Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/14 Report: 10/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 09/06/2011	5 Payee name First Data Merchant Services
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6 Amount (\$) \$25.00	7 Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 10/03/2011	Payee name First Data Merchant Services
--------------------	--

Amount (\$) \$25.00	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/03/2011	Payee name First Data Merchant Services
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Amount (\$) \$168.88	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/03/2011	Payee name First Data Merchant Services
--------------------	--

Amount (\$) \$0.87	Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
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Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/14 Report: 11/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 12/05/2011	5 Payee name First Data Merchant Services
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6 Amount (\$) \$25.00	7 Payee address City; State; Zip Code PO Box 6600 Hagerstown, MD 21741-6600
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Service Fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2011	Payee name Flowers on the Square
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Amount (\$) \$63.87	Payee address City; State; Zip Code 2110 Westbank Landing Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flowers for Constituents
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/09/2011	Payee name Flowers on the Square
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Amount (\$) \$64.95	Payee address City; State; Zip Code 2110 Westbank Landing Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flowers for Constituents
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/19/2011	Payee name Fort Worth Club
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Amount (\$) \$173.20	Payee address City; State; Zip Code 305 W. 7th Street Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/14 Report: 12/18		2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (TEC filers) 00999999	
4 Date 10/26/2011		5 Payee name Fort Worth Club			
6 Amount (\$) \$173.20		7 Payee address City; State; Zip Code 305 W. 7th Street Fort Worth, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership dues	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/21/2011		Payee name Fort Worth Club			
Amount (\$) \$50.00		Payee address City; State; Zip Code 305 W. 7th Street Fort Worth, TX 76102			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/01/2011		Payee name Go Daddy			
Amount (\$) \$82.10		Payee address City; State; Zip Code 14455 N. Hayden Road Suite 219 Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hosting Expense for Website Domain	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/13/2011		Payee name Go Daddy			
Amount (\$) \$134.66		Payee address City; State; Zip Code 14455 N. Hayden Road Suite 219 Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hosting Expense for Website Domain	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/14 Report: 13/18		2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (TEC filers) 00999999	
4 Date 07/20/2011		5 Payee name Jane Hedgpeth			
6 Amount (\$) \$180.00		7 Payee address City; State; Zip Code 1339 Bonham Ter Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign finance report consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/09/2011		Payee name Leadership Fort Worth			
Amount (\$) \$100.00		Payee address City; State; Zip Code P.O. Box 11371 Fort Worth, TX 76110			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Dues	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/05/2011		Payee name Leukemia & Lymphoma Society			
Amount (\$) \$250.00		Payee address City; State; Zip Code 5005 Mitchelldale Suite 115 Houston, TX 77092			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for Team in Training	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/05/2011		Payee name NGP Software Inc.			
Amount (\$) \$630.00		Payee address City; State; Zip Code 1225 I St NW Suite 1225 Washington, DC 20005-3914			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donor software quarterly fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/14 Report: 14/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 07/12/2011	5 Payee name NGP Software Inc.
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6 Amount (\$) \$640.00	7 Payee address City; State; Zip Code 1225 I St NW Suite 1225 Washington, DC 20005-3914
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donor software quarterly fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/03/2011	Payee name NGP Software Inc.
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Amount (\$) \$630.00	Payee address City; State; Zip Code 1225 I St NW Suite 1225 Washington, DC 20005-3914
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donor software quarterly fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/28/2011	Payee name North Texas GLBT Chamber
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Amount (\$) \$200.00	Payee address City; State; Zip Code 3824 Cedar Springs Road Suite 429 Dallas, TX 75219
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/02/2011	Payee name PAIR Networks Inc.
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Amount (\$) \$159.20	Payee address City; State; Zip Code 2403 Sidney Street Suite 210 Pittsburgh, PA 15203
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Webhosting data storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/14 Report: 15/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 08/02/2011	5 Payee name PAIR Networks Inc.
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6 Amount (\$) \$196.70	7 Payee address City; State; Zip Code 2403 Sidney Street Suite 210 Pittsburgh, PA 15203
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Webhosting data storage
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/02/2011	Payee name PAIR Networks Inc.
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Amount (\$) \$330.73	Payee address City; State; Zip Code 2403 Sidney Street Suite 210 Pittsburgh, PA 15203
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Webhosting data storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/01/2011	Payee name PAIR Networks Inc.
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Amount (\$) \$283.40	Payee address City; State; Zip Code 2403 Sidney Street Suite 210 Pittsburgh, PA 15203
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Webhosting data storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2011	Payee name PAIR Networks Inc.
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Amount (\$) \$291.80	Payee address City; State; Zip Code 2403 Sidney Street Suite 210 Pittsburgh, PA 15203
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Webhosting data storage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/14 Report: 16/18		2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (TEC filers) 00999999	
4 Date 08/05/2011		5 Payee name Rachael Butts			
6 Amount (\$) \$451.81		7 Payee address City; State; Zip Code 921 Bogart Road Cedar Park, TX 78613			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website Development Services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/12/2011		Payee name Roy C. Brooks Campaign			
Amount (\$) \$150.00		Payee address City; State; Zip Code PO Box 16868 Fort Worth, TX 76162-0868			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/03/2011		Payee name Sign a Rama			
Amount (\$) \$162.38		Payee address City; State; Zip Code 2400 W Pioneer Pkwy Pantego, TX 76013-6058			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Banner	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/16/2011		Payee name Stage West			
Amount (\$) \$250.00		Payee address City; State; Zip Code 821 West Vickery Blvd. Fort Worth, TX 76104			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dontribution for Acting with the Stars Event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/14 Report: 17/18	2 FILER NAME Burns, Joel (Mr.)	3 ACCOUNT # (TEC filers) 00999999
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4 Date 12/20/2011	5 Payee name The Chadderdon Group
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6 Amount (\$) \$3,245.92	7 Payee address City; State; Zip Code 107 E Windsor Ave Alexandria, VA 22301-1315
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Design print and mail office holder holiday card
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/15/2011	Payee name Times Ten Cellars
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Amount (\$) \$765.00	Payee address City; State; Zip Code 1100 Foch St Fort Worth, TX 76107-2922
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Inkind Beverages for Wendy Davis Campaign political event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/20/2011	Payee name XCOM GLOBAL
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Amount (\$) \$254.00	Payee address City; State; Zip Code 5910 Pacific Center Blvd. Suite 320 San Diego, CA 92121
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wifi Service for campaign
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/21/2011	Payee name XCOM GLOBAL
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Amount (\$) \$119.60	Payee address City; State; Zip Code 5910 Pacific Center Blvd. Suite 320 San Diego, CA 92121
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wifi Service for campaign
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/14 Report: 18/18		2 FILER NAME Burns, Joel (Mr.)		3 ACCOUNT # (TEC filers) 00999999	
4 Date 09/20/2011		5 Payee name XCOM GLOBAL			
6 Amount (\$) \$73.88		7 Payee address City; State; Zip Code 5910 Pacific Center Blvd. Suite 320 San Diego, CA 92121			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wifi Service for campaign	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	