POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/39 Report: 82/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/12/2009	American Airlines 1217 Main St Dallas, TX 75202-3908	$198.00

8 Purpose of payment (See instructions regarding type of information required.)
Travel

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/12/2009	American Airlines 1217 Main St Dallas, TX 75202-3908	$219.20

Purpose of payment (See instructions regarding type of information required.)
Travel

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/12/2009	American Airlines 1217 Main St Dallas, TX 75202-3908	$219.20

Purpose of payment (See instructions regarding type of information required.)
Travel

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/10/2009	Angle, Luke 1701 Emery St Denton, TX 76201-2547	$200.00

Purpose of payment (See instructions regarding type of information required.)
Band for Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/39 Report: 83/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
06/17/2009	Black Tie Dinner Dallas, TX	$1,000.00

8 Purpose of payment (See instructions regarding type of information required.)
Contribution

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/10/2009	Brewer, Peter 1113 Peak St Denton, TX 76201-7059	$200.00

Purpose of payment (See instructions regarding type of information required.)
Band for Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/10/2009	Carroll, Andrew 1000 N Bonnie Brae St Victory Hall Denton, TX 76201-2420	$200.00

Purpose of payment (See instructions regarding type of information required.)
Band for Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/10/2009	Civic Strategies 1201 W Park Row Dr Arlington, TX 76013-3602	$225.00

Purpose of payment (See instructions regarding type of information required.)
Printing for Mailer (B-Day Host Mailer)

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/39 Report: 84/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/07/2009	Civic Strategies 1201 W Park Row Dr Arlington, TX 76013-3602	$2,358.00

8 Purpose of payment (See instructions regarding type of information required.)
Jan. 15 Report and Candidate Research and

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/07/2009	Civic Strategies 1201 W Park Row Dr Arlington, TX 76013-3602	$108.00

Purpose of payment (See instructions regarding type of information required.)
Remittance Cards and Reimb. for Nametags

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/11/2009	Civic Strategies 1201 W Park Row Dr Arlington, TX 76013-3602	$130.00

Purpose of payment (See instructions regarding type of information required.)
Website Updates

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/04/2009	Civic Strategies 1201 W Park Row Dr Arlington, TX 76013-3602	$469.80

Purpose of payment (See instructions regarding type of information required.)
Printing/Thank you notes

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/39 Report: 87/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/25/2009	Fort Worth Police Officers' Award Foundation PO Box 17659 Fort Worth, TX 76102-0659	$250.00

8 Purpose of payment (See instructions regarding type of information required.)
Contribution

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/17/2009	Fort Worth Star Telegram 111 W. Abram Street Fort Worth, TX	$207.20

Purpose of payment (See instructions regarding type of information required.)
Subscription

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/20/2009	Four Points Sheraton 2828 Southwest Fwy Houston, TX 77098-4502	$235.08

Purpose of payment (See instructions regarding type of information required.)
Hotel for Houston Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/26/2009	Gourmet Gift Baskets.com 1050 Holt Ave Manchester, NH 03109-5615	$89.97

Purpose of payment (See instructions regarding type of information required.)
Gift Basket for Host Annise Parker

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/39 Report: 88/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/19/2009	Graphics 2 507 S Main St Fort Worth, TX 76104-2409	$2,059.72

8 Purpose of payment (See instructions regarding type of information required.)
Print & Mail of B-Day Invitation

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/28/2009	Graphics 2 507 S Main St Fort Worth, TX 76104-2409	$2,333.55

Purpose of payment (See instructions regarding type of information required.)
Follow Up Mailer B-Day

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/21/2009	Hogenmiller, Michael 3917 Dunbarton Way NE Roswell, GA 30075-2001	$433.50

Purpose of payment (See instructions regarding type of information required.)
Layout & Design B-Day Invitation

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/11/2009	Hogenmiller, Michael 3917 Dunbarton Way NE Roswell, GA 30075-2001	$226.50

Purpose of payment (See instructions regarding type of information required.)
Follow Up Mailer B-Day Party

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/39 Report: 90/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/19/2009	Internal Revenue Service PO Box 105083 Atlanta, GA 30348-5083	$854.00

8 Purpose of payment (See instructions regarding type of information required.)
PayRoll Taxes

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
04/28/2009	Internal Revenue Service PO Box 105083 Atlanta, GA 30348-5083	$854.00

Purpose of payment (See instructions regarding type of information required.)
Pay Roll Taxes

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/01/2009	Internal Revenue Service PO Box 105083 Atlanta, GA 30348-5083	$64.00

Purpose of payment (See instructions regarding type of information required.)
Pay Roll Taxes

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/21/2009	Internet Desk Inc. 9330 Lyndon B Johnson Fwy Ste 900 Dallas, TX 75243-3443	$920.13

Purpose of payment (See instructions regarding type of information required.)
Data Recovery

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/39 Report: 91/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/06/2009	Lumen Event Lighting 120 N Dooley St Ste E Grapevine, TX 76051-6259	$1,450.00

8 Purpose of payment (See instructions regarding type of information required.)
Event Rental

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Mai's Restaurant 3403 Milam St Houston, TX 77002-9531	$43.90

Purpose of payment (See instructions regarding type of information required.)
Lunch for Staff

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Mai's Resteraunt 3403 Milam St Houston, TX 77002-9531	$43.90

Purpose of payment (See instructions regarding type of information required.)
Lunch for Staff

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/13/2009	Masonic Temple Library & Museum of Fort Worth 1100 Henderson St Fort Worth, TX 76102-4521	$1,625.00

Purpose of payment (See instructions regarding type of information required.)
Deposit & 1st Installment of Venue Rental

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/39 Report: 92/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/01/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$1,365.17

8 Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/16/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$1,365.17

Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/17/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$1,365.17

Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/27/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$1,365.17

Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/39 Report: 93/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/13/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$1,365.17

8 Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/31/2009	McCarty, Taylor 3260 River Lodge Trl N Apt 622 Fort Worth, TX 76116-0839	$2,730.00

Purpose of payment (See instructions regarding type of information required.)
Salary

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/05/2009	Museum of Modern Art 3200 Darnell St Fort Worth, TX 76107-2872	$125.00

Purpose of payment (See instructions regarding type of information required.)
Gift for Host

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/20/2009	NGP Software Inc. 1225 I St NW Suite 1225 Washington, DC 20005-3914	$750.00

Purpose of payment (See instructions regarding type of information required.)
Database Management

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 15/39 Report: 94/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/22/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$14.80

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/39 Report: 95/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/27/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$14.80

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/27/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$29.30

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/28/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/28/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.46

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/39 Report: 96/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/28/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$29.30

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/28/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/29/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/29/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 18/39 Report: 97/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/29/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/29/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/30/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Service Merchant Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/30/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 19/39 Report: 98/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/30/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$14.80

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/31/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/01/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.03

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/01/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/39 Report: 99/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 21/39 Report: 100/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/03/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 22/39 Report: 101/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/03/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 23/39 Report: 102/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 24/39 Report: 103/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/04/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 25/39 Report: 104/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/05/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 26/39 Report: 105/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 27/39 Report: 106/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 28/39 Report: 107/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/07/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$7.55

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/10/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/15/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/28/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.46

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 29/39 Report: 108/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/01/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.03

8 Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/03/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.03

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/03/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$3.20

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/03/2009	Paypal PO Box 45950 Omaha, NE 68145-0950	$1.75

Purpose of payment (See instructions regarding type of information required.)
Merchant Service Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 30/39 Report: 109/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/29/2009	Perrotti's Pizza TCU 3021 Green Avenue Fort Worth, TX 76109	$76.57

8 Purpose of payment (See instructions regarding type of information required.)
Pizza for Volunteers
(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/05/2009	Planned Parenthood of North Texas 7424 Greenville Ave Dallas, TX 75231-4552	$1,500.00

Purpose of payment (See instructions regarding type of information required.)
Table for 2009 Luncheon
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/02/2009	Progressive Capitol Group Inc. 888 16th St NW Ste 680 Washington, DC 20006-4108	$1,039.00

Purpose of payment (See instructions regarding type of information required.)
Fundraising
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/15/2009	Shell Gas Station Houston, TX	$40.98

Purpose of payment (See instructions regarding type of information required.)
Gas?
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 31/39 Report: 110/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
06/12/2009	Sonic Drive In Palmer, TX	$8.51

8 Purpose of payment (See instructions regarding type of information required.)
Lunch for Staff

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/21/2009	Staples 5650 Overton Ridge Blvd Fort Worth, TX 76132-3272	$34.62

Purpose of payment (See instructions regarding type of information required.)
Nametags and Labels for Houston Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/24/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$10.83

Purpose of payment (See instructions regarding type of information required.)
Cutting for Naomi Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/24/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$15.69

Purpose of payment (See instructions regarding type of information required.)
Supplies for Aberly Event

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 32/39 Report: 111/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/27/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$81.69

8 Purpose of payment (See instructions regarding type of information required.)
Office Supplies
(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/10/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$21.63

Purpose of payment (See instructions regarding type of information required.)
Office Supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/11/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$98.99

Purpose of payment (See instructions regarding type of information required.)
Office Supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/24/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$59.15

Purpose of payment (See instructions regarding type of information required.)
Office Supplies
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 33/39 Report: 112/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/26/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$59.15

8 Purpose of payment (See instructions regarding type of information required.)
Office Supplies

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/28/2009	Staples 1600 S University Dr Fort Worth, TX 76107-6558	$78.55

Purpose of payment (See instructions regarding type of information required.)
Supplies for VBM Mailer

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
05/11/2009	Starbucks	$8.05

Purpose of payment (See instructions regarding type of information required.)
Coffee for Staff

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
06/18/2009	Sweet Tomatoes 4001 Matlock Rd Arlington, TX 76015-4307	$23.08

Purpose of payment (See instructions regarding type of information required.)
???

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 34/39 Report: 113/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/06/2009	Taylor's Rental Equipment Co Inc. PO Box 470764 Fort Worth, TX 76147-0764	$1,122.01

8 Purpose of payment (See instructions regarding type of information required.)
Event Rentals

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/11/2009	Taylor's Rental Equipment Co Inc. PO Box 470764 Fort Worth, TX 76147-0764	$75.96

Purpose of payment (See instructions regarding type of information required.)
Event Rentals

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/13/2009	Teresa's Catering Service 2709 Scott Ave Fort Worth, TX 76103-2330	$1,680.00

Purpose of payment (See instructions regarding type of information required.)
Catering Staff for B-Day Party

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/23/2009	Texas Workforce Commission PO Box 149037 Austin, TX 78714-9037	$90.00

Purpose of payment (See instructions regarding type of information required.)
Employee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 35/39 Report: 114/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/26/2009	The Chadderdon Group 107 E Windsor Ave Alexandria, VA 22301-1315	$4,387.50

8 Purpose of payment (See instructions regarding type of information required.)
VBM

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/06/2009	Tom Thumb 6377 Camp Bowie Blvd Fort Worth, TX 76116-5473	$71.69

Purpose of payment (See instructions regarding type of information required.)
Supplies for B-Day Party

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/17/2009	Tyson Organization 855 Texas St Ste 100 Fort Worth, TX 76102-4574	$662.15

Purpose of payment (See instructions regarding type of information required.)
InKind to Aids Outreach Center

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/09/2009	U.S Post Office 300 E South St Arlington, TX 76004-9001	$168.00

Purpose of payment (See instructions regarding type of information required.)
Postage for mailing

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 36/39 Report: 115/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/12/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$168.00

8 Purpose of payment (See instructions regarding type of information required.)
Postage

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/26/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$72.00

Purpose of payment (See instructions regarding type of information required.)
P.O. Box Fee

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/27/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$42.00

Purpose of payment (See instructions regarding type of information required.)
Stamps for B-Day Mailer

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/16/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$37.80

Purpose of payment (See instructions regarding type of information required.)
Postage B-Day Thank you Notes

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 37/39 Report: 116/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/24/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$151.20

8 Purpose of payment (See instructions regarding type of information required.)
Postage for Dallas Event

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/26/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$8.40

Purpose of payment (See instructions regarding type of information required.)
Postage

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/27/2009	U.S. Post Office 2600 8th Ave Fort Worth, TX 76110-3051	$840.00

Purpose of payment (See instructions regarding type of information required.)
Postage for VBM Mailer

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	U.S. Postal Service 4450 Oak Park Ln Fort Worth, TX 76109-9538	$37.80

Purpose of payment (See instructions regarding type of information required.)
Postage for B-Day Mailer

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 38/39 Report: 117/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/09/2009	US Post Office 300 E South St Arlington, TX 76004-9001	$168.00

8 Purpose of payment (See instructions regarding type of information required.)
Postage for B-Day Host Letter
(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/10/2009	Walgreens 921 Henderson St Fort Worth, TX 76102-3535	$10.76

Purpose of payment (See instructions regarding type of information required.)
Supplies for Campaign Meeting
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/22/2009	Walgreens 4350 Oak Park Ln Fort Worth, TX 76109-1512	$42.00

Purpose of payment (See instructions regarding type of information required.)
Postage
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/10/2009	Wrinkle, Willie 1701 Emery St Denton, TX 76201-2547	$200.00

Purpose of payment (See instructions regarding type of information required.)
Band for Event
(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:
Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 39/39 Report: 118/118

2 FILER NAME Burns, Joel

3 ACCOUNT # (Ethics Commission filers)
00999999

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/25/2009	XPEDX 2017 White Settlement Rd Fort Worth, TX 76107-1439	$71.67

8 Purpose of payment (See instructions regarding type of information required.)
Supplies for VBM

(If travel outside of Texas, complete Schedule T) ☐

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/23/2009	XPEDX P&G MW Store #105 2017 White Settlement Rd Fort Worth, TX 76107-1439	$71.67

Purpose of payment (See instructions regarding type of information required.)
VBM Mailing Supplies

(If travel outside of Texas, complete Schedule T) ☐

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held: