



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Hicks, Troy (Mr.)

15 ACCOUNT # (Ethics Commission filers)  
00000001

16 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. ..

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,304.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
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4. TOTAL POLITICAL EXPENDITURES	\$ 2,720.73
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 759.96
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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18 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.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Troy J Hicks, this the 12<sup>th</sup> day of April, 2007, to certify which, witness my hand and seal of office.

  
Signature of officer administering oath

DOLORIS M JENKINS  
Print name of officer administering oath

  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.				<b>1</b> PAGE # Schedule: 1/8 Report: 3/18	
<b>2</b> FILER NAME Hicks, Troy (Mr.)			<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001		
<b>4</b> Date  02/17/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gammon, Rick (Mr.) El Paso, TX			<b>7</b> Amount of contribution (\$)  \$30.00	
<b>6</b> Contributor address; City; State; Zip Code					
<b>8</b> Principal occupation / Job title (See Instructions)			<b>9</b> Employer (See Instructions)		
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			<b>11</b> In-kind description (if applicable)		
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
<b>13</b> Departure city / location		<b>14</b> Departure date	<b>15</b> Destination city / location		<b>16</b> Arrival date
<b>17</b> Means of transportation			<b>18</b> Purpose of travel		
<b>4</b> Date  02/17/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Graham, Raymond (Mr.)			<b>7</b> Amount of contribution (\$)  \$49.00	
<b>6</b> Contributor address; City; State; Zip Code 10124 Stoneway Dr. El Paso, TX 79925					
<b>8</b> Principal occupation / Job title (See Instructions)			<b>9</b> Employer (See Instructions)		
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			<b>11</b> In-kind description (if applicable)		
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
<b>13</b> Departure city / location		<b>14</b> Departure date	<b>15</b> Destination city / location		<b>16</b> Arrival date
<b>17</b> Means of transportation			<b>18</b> Purpose of travel		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 2/8 Report: 4/18	
<b>2</b> FILER NAME Hicks, Troy (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  02/13/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gray, Bob (Mr.) ..... <b>6</b> Contributor address; City; State; Zip Code 4924 Vista Grande El Paso, TX 79922	<b>7</b> Amount of contribution (\$)  \$750.00	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable) Web site design and hosting <a href="http://www.troyhicks.org">www.troyhicks.org</a>	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	
<b>4</b> Date  02/21/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Harper, Mamie (Mrs.) ..... <b>6</b> Contributor address; City; State; Zip Code 939 Rim El Paso, TX 79902	<b>7</b> Amount of contribution (\$)  \$100.00	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 3/8 Report: 5/18	
<b>2</b> FILER NAME Hicks, Troy (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  02/17/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hicks, Joe (Mr.) El Paso, TX 79936	<b>7</b> Amount of contribution (\$)  \$100.00	
<b>6</b> Contributor address; City; State; Zip Code			
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	
<b>4</b> Date  02/17/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ingraham, Steve (Mr.)	<b>7</b> Amount of contribution (\$)  \$200.00	
<b>6</b> Contributor address; City; State; Zip Code 625 Cascade Ln El Paso, TX 79912			
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		1 PAGE # Schedule: 4/8 Report: 6/18	
2 FILER NAME Hicks, Troy (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  01/26/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Karlsruher, Eileen (Mrs.) ..... 6 Contributor address; City; State; Zip Code 35 Sun Point Lane El Paso, TX 79912	7 Amount of contribution (\$)  \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date  01/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Phillips, Walt (Mr.) ..... 6 Contributor address; City; State; Zip Code 9928 Bomarc El Paso, TX 79924	7 Amount of contribution (\$)  \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 5/8 Report: 7/18	
<b>2</b> FILER NAME Hicks, Troy (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  02/17/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Priegel, Roger (Mr.)  ..... <b>6</b> Contributor address; City; State; Zip Code 9164 Turrentine Dr. El Paso, TX 79925	<b>7</b> Amount of contribution (\$)  \$150.00	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	
<b>4</b> Date  01/22/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramirez, K. C. (Dr.)  ..... <b>6</b> Contributor address; City; State; Zip Code 240 Smith Rd. El Paso, TX 79907	<b>7</b> Amount of contribution (\$)  \$25.00	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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

**1** PAGE #  
Schedule: 6/8 Report: 8/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  02/26/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramirez, K.C. (Dr.)  ..... <b>6</b> Contributor address; City; State; Zip Code 240 Smith Rd. El Paso, TX 79907	<b>7</b> Amount of contribution (\$)  \$25.00
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<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
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<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	<b>11</b> In-kind description (if applicable)
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**12** Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
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<b>17</b> Means of transportation	<b>18</b> Purpose of travel
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<b>4</b> Date  02/27/2007	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rodriguez, Margaret (Mrs.)  ..... <b>6</b> Contributor address; City; State; Zip Code 8829 Old County Rd. El Paso, TX 79907	<b>7</b> Amount of contribution (\$)  \$25.00
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<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
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<b>10</b> In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	<b>11</b> In-kind description (if applicable)
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**12** Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
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<b>17</b> Means of transportation	<b>18</b> Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 9/18	
2 FILER NAME Hicks, Troy (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  03/21/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Serna, Alan (Mr.)  6 Contributor address; City; State; Zip Code 595 Cora Pl. El Paso, TX 79915	7 Amount of contribution (\$)  \$1,950.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable) In-Kind production and placement of radio ads.	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date  04/11/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) The El Paso Association of Fire Fighters  6 Contributor address; City; State; Zip Code 3112 Fomey El Paso, TX 79935	7 Amount of contribution (\$)  \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/8 Report: 10/18

2 FILER NAME Hicks, Troy (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/14/2007

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

Yellen, Tracy (Mrs.)

6 Contributor address; City; State; Zip Code

925 McKelligon  
El Paso, TX 79902

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/4 Report: 11/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
02/06/2007

**5** Payee name  
Bowl El Paso  
El Paso, TX  
**6** Payee address; City; State; Zip Code

**7** Amount  
(\$)  
\$50.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Political Advertizing

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

**4** Date  
02/17/2007

**5** Payee name  
Bowl El Paso Food  
El Paso, TX  
**6** Payee address; City; State; Zip Code

**7** Amount  
(\$)  
\$150.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Fundraiser Food and Bev.

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/4 Report: 12/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
  
02/01/2007

**5** Payee name  
Digital Edge Signs

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**6** Payee address; City; State; Zip Code  
9300 Carnegie Suite H  
El Paso, TX 79925

**7** Amount  
(\$)  
  
\$218.50

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Political Signs

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

**4** Date  
  
03/01/2007

**5** Payee name  
Digital Edge Signs

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**6** Payee address; City; State; Zip Code  
9300 Carnegie Suite H  
El Paso, TX 79925

**7** Amount  
(\$)  
  
\$348.40

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Political Signs

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 3/4 Report: 13/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
  
01/31/2007

**5** Payee name  
GECU  
El Paso, TX 79936  
  
**6** Payee address; City; State; Zip Code

**7** Amount  
(\$)  
  
\$10.00

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

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

**4** Date  
  
02/28/2007

**5** Payee name  
GECU  
El Paso, TX  
  
**6** Payee address; City; State; Zip Code

**7** Amount  
(\$)  
  
\$10.00

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

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

Payment for travel outside Texas (complete boxes 10-16)

Office sought:  
Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**11** Departure city / location

**12** Departure date

**13** Destination city / location

**14** Arrival date

**15** Means of transportation

**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 4/4 Report: 14/18**2** FILER NAME Hicks, Troy (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date  
  
03/31/2007**5** Payee name  
GECU  
El Paso, TX  
  
**6** Payee address; City; State; Zip Code**7** Amount  
(\$)  
  
\$10.00**8** Purpose of payment  
(See instructions regarding type of information required.)  
Bank Service Fee**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name: Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date  
  
01/12/2007**5** Payee name  
Office Depot  
El Paso, TX 79936  
  
**6** Payee address; City; State; Zip Code**7** Amount  
(\$)  
  
\$112.53**8** Purpose of payment  
(See instructions regarding type of information required.)  
Printing materials**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name: Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

<b>The INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 PAGE #</b> Schedule: 1/4 Report: 15/18	
<b>2 FILER NAME</b> Hicks, Troy (Mr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000001	
<b>4 Date</b>  04/10/2007	<b>5 Payee name</b> Digital Edge Signs  ..... <b>6 Payee address; City; State; Zip Code</b> 9300 Carnegie Suite H El Paso, TX 79925	<b>7 Amount (\$)</b>  \$1,775.30	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
<b>8 Purpose of expenditure</b> (See instructions regarding type of information required.) Political signs and shirts  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
<b>9 Name of person(s) traveling on whose behalf the expenditure for travel was made</b> (attach additional pages if necessary)			
<b>10 Departure city / location</b>	<b>11 Departure date</b>	<b>12 Destination city / location</b>	<b>13 Arrival date</b>
<b>14 Means of transportation</b>		<b>15 Purpose of travel</b>	
<b>4 Date</b>  01/13/2007	<b>5 Payee name</b> Ray Pearson Forum El Paso, TX  ..... <b>6 Payee address; City; State; Zip Code</b>	<b>7 Amount (\$)</b>  \$6.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
<b>8 Purpose of expenditure</b> (See instructions regarding type of information required.) Forum refreshments  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
<b>9 Name of person(s) traveling on whose behalf the expenditure for travel was made</b> (attach additional pages if necessary)			
<b>10 Departure city / location</b>	<b>11 Departure date</b>	<b>12 Destination city / location</b>	<b>13 Arrival date</b>
<b>14 Means of transportation</b>		<b>15 Purpose of travel</b>	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

**1** PAGE #  
Schedule: 2/4 Report: 16/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
01/20/2007

**5** Payee name  
Ray Pearson Forum  
El Paso, TX  
.....  
**6** Payee address; City; State; Zip Code

**7** Amount (\$)  
\$6.00

Reimbursement from political contributions intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
Forum refreshments

Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel

**4** Date  
01/27/2007

**5** Payee name  
Ray Pearson Forum  
El Paso, TX  
.....  
**6** Payee address; City; State; Zip Code

**7** Amount (\$)  
\$6.00

Reimbursement from political contributions intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
Forum refreshments

Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

**1** PAGE #  
Schedule: 3/4 Report: 17/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
  
02/17/2007

**5** Payee name  
Ray Pearson Forum  
El Paso, TX  
  
.....  
**6** Payee address; City; State; Zip Code

**7** Amount (\$)  
  
\$6.00

Reimbursement from political contributions intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
Forum refreshments

Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel

**4** Date  
  
03/24/2007

**5** Payee name  
Ray Pearson Forum  
El Paso, TX  
  
.....  
**6** Payee address; City; State; Zip Code

**7** Amount (\$)  
  
\$6.00

Reimbursement from political contributions intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
Forum refreshments

Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

**1** PAGE #  
Schedule: 4/4 Report: 18/18

**2** FILER NAME Hicks, Troy (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
  
04/07/2007

**5** Payee name  
Ray Pearson Forum  
El Paso, TX  
  
.....  
**6** Payee address; City; State; Zip Code

**7** Amount  
(\$)  
  
\$6.00

Reimbursement from  
political contributions  
intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
Forum refreshments

Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel