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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 19

OFFICE USE ONLY

Date Received: 2003 APR 25 PM 1:55 CITY CLERK DEPARTMENT

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
TITLE: Ms. FIRST: SUSAN MI: F.
NICKNAME LAST: AUSTIN SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS
ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE: 6205 PINEHURST, EL PASO, TX. 79912
☐ Change of Address

5 CAMPAIGN TREASURER NAME
TITLE: MR. FIRST: DAVID MI: M.
NICKNAME LAST: AUSTIN SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE: 6205 PINEHURST, EL PASO, TX 79912

7 CAMPAIGN TREASURER PHONE
AREA CODE: (915) PHONE NUMBER: 525-9040 EXTENSION

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

9 PERIOD COVERED
Month Day Year: 03/26/03 THROUGH Month Day Year: 4/24/03

10 ELECTION
ELECTION DATE Month Day Year: 05/03/03
ELECTION TYPE: ☐ Primary ☐ Runoff ☑ General ☐ Special

11 OFFICE
OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): CITY REPRESENTATIVE, DISTRICT 1

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••
Name: NONE REPORTED OR KNOWN
Address / PO Box, Apt. / Suite #, City, State, Zip Code:
☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME: SUSAN F. AUSTIN

15 ACCOUNT # (Ethics Commission filers)

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. ••

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 9,626.94
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 6,052.05
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

NOTARY PUBLIC STATE OF TEXAS
SHARON FYFFE
NOTARY PUBLIC
In and for the State of Texas
My commission expires
03-07-2006

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said SUSAN F. AUSTIN, this the 25th day of April, 2003, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: SHARON FYFFE | Title of officer administering oath: NOTARY PUBLIC

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 1 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/28/03	A. S. Feinberg 4855 N. Mesa, Ste. 120, El Paso, Tx 79912	$40.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/03	Max N. Osborn 6408 La Cadena, El Paso, Tx 79912	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/29/03	Mr. or Mrs. Robert D. Tollen 5728 Burning Tree, El Paso, Tx 79912	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/29/03	Sandra L. Tyler 713 Cresta Alta, El Paso, Tx 79912	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/29/03	Ann Renée Wilsey 6229 La Posta, El Paso, Tx 79912	$25.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 2 of 13

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/27/03	WOODY L. HUNT P.O. BOX 12220, EL PASO, TX 79913	$500.00	

9 Principal occupation (Optional):
10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/27/03	JIM R. PHILLIPS 900 THUNDERBIRD, EL PASO, TX 79912	$250.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/27/03	JENNIFER LYNN BARR 1-4 ARDORINO DR, SUNLAND PARK, NM 88063	$50.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/30/03	JAMES W. OR RANDI BROWER 4212 N. STANTON, EL PASO, TX 79902	$100.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/31/03	KARL F. & PATRICIA S. PERRY 141 CAMINO BARRANCA, EL PASO, TX 79912	$250.00	

Principal occupation (Optional):
Employer (Optional):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 3 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/2/03	Lorenzo & Margarita Aguilar 7237 Tierra Alta, El Paso, Tx 79912	$250.00	

9 Principal occupation (Optional): 10 Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/27/03	LOBE PAC #1 McKelligon Canyon Rd., El Paso, Tx 79930	$500.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/03	Williams Family Living Trust 5711 Mira Grande, El Paso, Tx 79912	$500.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/31/03	W. Keith Myers 833 Forest Willow, El Paso, Tx 79922	$100.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/2/03	S. Lind Williams 25696 Dillon Rd. Laguna Hills, CA 92653	$500.00	

Principal occupation (Optional): Employer (Optional):

☐ out-of-state PAC (ID#: _____)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 4 of 13

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/6/03	CARL H. GREEN 1025 RIM ROAD PL., EL PASO, TX 79902	$500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/03	PAUL + SUZANNE DIPP P.O. BOX 55, EL PASO, TX 79940	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/3/03	JAMES M. LANGFORD 6105 PINEHURST, EL PASO, TX 79912	$150.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/31/03	BARBARA B. MILLER LIVING TRUST 901 W. 9TH ST., STE. 407 AUSTIN, TEXAS 78703	$50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/03	MARYLEE WARWICK SURECKY 732 LIVE OAK DR., EL PASO, TX 79932	$50.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 5 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/7/03	James O. Manley 601 S. Mesa Hills Dr. # 526 El Paso, Texas 79912	$100.00	

9 Principal occupation (Optional):
10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/03	Angie & W. D. White 648 Moondale, El Paso, Tx 79912	$50.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/7/03	Jim & Linda Volk 867 Via Bonita, El Paso, Tx 79912	$100.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/03	Laura Leslie 425 Lombardy, El Paso, Tx 79922	$50.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/03	Susan A. Gore 4242 Lomo Alto N53 Dallas, Tx 75219	$50.00	

Principal occupation (Optional):
Employer (Optional):

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SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 6 of 13

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/7/03	HERBERT & BRENDA EHRLICH 424 CROWN POINT, EL PASO, TX 79912	$100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/03	LINDA KIRBY 1205 RIM ROAD PL., EL PASO, TX 79902	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/10/03	DR. JEFF EKERY	$50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/9/03	MR. & MRS. JOSHUA KAHN 1575 BELVIDERE NO 223, EL PASO, TX 79912	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/8/03	ELLEN GOODMAN 516 LA CANTERA	$100.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 7 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/8/03	Mr. & Mrs. Richard Schlozhauer 545 Stonebluff, El Paso, Tx 79912	$100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/11/03	James C. & Stacy J. Hunt 509 Linda Ave, El Paso, Tx 79922	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/9/03	Julie VanZant Lama 6006 Balcones Ct. No. 34 El Paso, Tx 79912	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/9/03	Joyce Whitfield Haynes 6006 Balcones Ct. No. 14 El Paso, Tx 79912	$35.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/5/03	Timothy & Julie Gray 6011 Pinehurst, El Paso, Tx 79912	$200.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 8 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/8/03	James A. Fager 6208 Pinehurst, El Paso, Tx 79912	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/03	Elena Faye Dilorio 5419 Pine, Bellaire, Tx. 77401	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/6/03	Kim R. Geezle 10848 Admiral Dr., Oklahoma City Oklahoma 73162	$50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/03	Steve Findeiss 1304 Atlanta, Norman, Oklahoma 73071	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/12	Rachael Jiminez 7358 Luz de Dia El Paso, Tx 79912	$50.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
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1 Total pages this Schedule A1: 9 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/13/03	Gina M. Roe 6716 Desert Canyon Drive El Paso, TX 79912	$200.00	

9 Principal occupation (Optional): 10 Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/15/03	Teresa + Charles Cavazetta 729 Twin Hills Dr. El Paso, TX 79912	$100.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/14/03	Mr. + Mrs. Roy T. Chapman 1711 N. Kansas, El Paso, Tx. 79902	$200.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	Gary Perras	$100.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	Mike Dipp P.O. Box 1736, El Paso, Tx. 79949	$100.00	

Principal occupation (Optional): Employer (Optional):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 10 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/17/03	North American Realty 3418 Pershing, El Paso, Tx 79903	$200.00	

9 Principal occupation (Optional): 10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/14/03	Ramiro Guzman P.O. Box 370396, El Paso, Tx 79937	$100.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/15/03	A.G.C. PAC 4625 Ripley, El Paso, Tx. 79922	$250.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/22/03	Morris Brown 4601 Cumberland, El Paso, Tx 79903	$50.00	

Principal occupation (Optional): Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/19/03	Fermin Dezada Jr. 425 Franklin Ave, El Paso, Tx 79912	$150.00	

Principal occupation (Optional): Employer (Optional):

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

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Revised 04/03/2000

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 11 of 13

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/17/03	GERARDO & MARGARITA LICON 5604 EAGLE POINT, EL PASO, TX 79912	$200.00	

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	CARLOS AGUILAR III 3418 PERSHING, EL PASO, TX 79903	$38.47	FUNDRAISING BREAKFAST

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	MIKE DIPP 1000 E. OVERLAND, EL PASO, TX 79901	$38.47	FUNDRAISING BREAKFAST

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/16/03	MYRNA S. DECKARD 4276 CANTERBURY, EL PASO, TX 79902	$50.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/15/03	PATRICIA E. HOLLAND BRANCH 5051 MONTOYA, EL PASO, TX 79922	$75.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 12 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/18/03	E. Link Beck 1003 Los Saucedos Cir., El Paso, Tx 79912	$100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/18/03	Elizabeth Janie Vann 7012 Tecca Dr, El Paso, Tx 79912	$100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/18/03	Mervin & Linda Moore 415 Stotts Ave, El Paso, Tx 79932	$100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	Jesus Puga 3418 Pershing, El Paso, Tx 79903	$100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/03	Ruben Aguilar, Jr. 8201 Lockheed, Ste. 235, El Paso, Tx 79925	$100.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 13 of 13

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/17/03	Juan Sanchez 1000 E. Overland, El Paso, Tx 79901	$50.00	

9 Principal occupation (Optional):
10 Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/19/03	Mary Lou Geller 6148 Los Felinos, El Paso, Tx 79912	$25.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/6/03	Marina M. Findeiss 6325 N. Villa #135, Oklahoma City Oklahoma 73112	$100.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/21/03	Suzanne S. Azar 2424 Altura Ave., El Paso, Tx. 79930	$100.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/18/03	Scott PAC 11th Floor, Chase Bank Bldg. El Paso, Tx 79901	$250.00	

Principal occupation (Optional):
Employer (Optional):

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 1 OF 2

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/14/03	THE REVEL GROUP 6006 N. MESA, STE. 502 EL PASO, TEXAS 79912	$1,000.00

8 Purpose of payment (See instructions regarding type of information required.): WALK LIST, AUTOMATED PHONE MESSAGES, DATA ANALYSIS

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/16/03	H & H DINERO TREE 9020 MAYFLOWER EL PASO, TEXAS 79925	$827.98

Purpose of payment (See instructions regarding type of information required.): DIRECT MAIL

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/18/03	MITHOFF BURTON PARTNERS 4105 RIO BRAVO EL PASO, TEXAS 79902	$1,478.37

Purpose of payment (See instructions regarding type of information required.): NEWSPAPER ADS

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/21/03	U.S. POST OFFICE EL PASO, TEXAS 79912	$74.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 2 of 2

2 FILER NAME: SUSAN F. AUSTIN

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/18/03	H+H DINERO TREE 9020 MAYFLOWER EL PASO, TEXAS 79925	$750.38

8 Purpose of payment (See instructions regarding type of information required.)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
DIRECT MAIL	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/12/03	PROCESSING PLUS 6412 LA CADENA EL PASO, TEXAS 79912	$1,100.00

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
CAMPAIGN MANAGEMENT - APRIL	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/12/03	PROCESSING PLUS 6412 LA CADENA EL PASO, TEXAS 79912	$821.32

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
POSTAGE, POSTCARDS, SUPPLIES	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 1 of 2

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
3/27/03	Saxon's 4799 Doniphan Mesa El Paso, Texas 79902	Campaign Dinner	$120.07	✓
3/28/03	Sam's Club N. Mesa, El Paso, Texas 79912	Campaign Food	$88.48	✓
4/3/03	City of El Paso 2 Civic Center Plaza El Paso, Texas 79901	Reproduction - Campaign Reports	$2.60	✓
4/7/03	City of El Paso 2 Civic Center Plaza El Paso, TX 79901	Reproduction - Campaign Report	$1.30	✓
4/3/03	Kinko's 4190 N. Mesa El Paso, Texas 79902	Reproduction - Campaign Reports	$9.01	✓

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 2 of 2

2 FILER NAME: Susan F. Austin

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
4/14/03	U.S. Post Office El Paso, Texas 79912	Postage	$41.02	☑
4/19/03	U.S. Post Office El Paso, Texas 79912	Postage	$42.50	☑
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