



17. NOTICE FROM POLITICAL COMMITTEE(S)

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

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

additional pages

18 CONTRIBUTION TOTALS

|   |           |
|---|-----------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 400.00 |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ 400.00 |
| 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED  | \$ -0-    |
| 4. TOTAL POLITICAL EXPENDITURES   | \$ 600.00 |
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ 254.39 |
| 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$        |

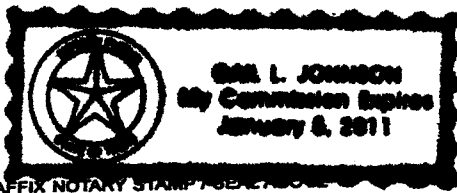
EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

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.



*Carolyn Davis*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Carolyn Davis this the 11 day of June 20 07 to certify which, witness my hand and seal of office.

*Gail L. Johnson* GAIL L. Johnson Admin. Asst.  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

|   |  |   |
|---|--|---|
| The Instruction Guide explains how to complete this form.   |  | 1 Total pages Schedule F:   |
| 2 FILER NAME  |  | 3 ACCOUNT # (Ethics Commission filers)  |
| 4 Date  | 5 Payee name                                     | 7 Amount (\$)   |
| 5/12/07<br>THRU<br>6/6/07   | Sharon Childress<br>2714 Burger Dallas, TX 75215 | \$600.00  |
| 6 Payee address; City; State; Zip Code  |  |   |
| 8 Purpose of payment (See instructions regarding type of information required.)<br><i>PHONE BANK</i><br>(If travel outside of Texas, complete Schedule T) |  | 9 ** Complete if direct expenditure to benefit C/OH **<br>Candidate / Officeholder name Office sought Office held |
| Date  | Payee name                                       | Amount (\$)   |
|   | Payee address; City; State; Zip Code             |   |
| Purpose of payment (See instructions regarding type of information required.)<br>(If travel outside of Texas, complete Schedule T)                        |  | ** Complete if direct expenditure to benefit C/OH **<br>Candidate / Officeholder name Office sought Office held   |
| Date  | Payee name                                       | Amount (\$)   |
|   | Payee address; City; State; Zip Code             |   |
| Purpose of payment (See instructions regarding type of information required.)<br>(If travel outside of Texas, complete Schedule T)                        |  | ** Complete if direct expenditure to benefit C/OH **<br>Candidate / Officeholder name Office sought Office held   |
| Date  | Payee name                                       | Amount (\$)   |
|   | Payee address; City; State; Zip Code             |   |
| Purpose of payment (See instructions regarding type of information required.)<br>(If travel outside of Texas, complete Schedule T)                        |  | ** Complete if direct expenditure to benefit C/OH **<br>Candidate / Officeholder name Office sought Office held   |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED