

042708

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

RECEIVED

## FORM C/OH COVER SHEET PG 1

205 MAY 27 PM 1:55

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

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages filed:

16

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

Pauline

NICKNAME

LAST

Medrano

SUFFIX

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2346 Douglas Ave Dallas TX 75219

Change of Address

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 528-7808

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

Joseph

NICKNAME

LAST

Ashmore, Jr.

MI

E.

SUFFIX

Receipt #

Amount

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

3636 Maple Ave. Dallas TX 75219

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 559-7202

9 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)

10 PERIOD COVERED

Month Day Year Month Day Year

4 / 28 / 05 THROUGH 5 / 27 / 05

11 ELECTION

ELECTION DATE: Month Day Year  
06 / 04 / 05

ELECTION TYPE:  
 Primary  Runoff  General  Special

12 OFFICE

OFFICE HELD (if any)

-

13 OFFICE SOUGHT (if known)

Dallas City Council, District 2

14 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

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

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042708

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

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

GENERAL

SPECIFIC

COMMITTEE NAME

NA

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

\$

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

\$ 27,435.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 3217.57

4. TOTAL POLITICAL EXPENDITURES

\$ 26,457.44

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 21,753.17

OUTSTANDING LOAN TOTALS

6. 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.

*Pauline Medrano*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Pauline Medrano, this the 27 day of May, 2008, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

*Beatrice Rodriguez*

Printed name of officer administering oath

*Notary Public*

Title of officer administering oath

000002

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule A:  
1 + 2 (attached)

2 FILER NAME *Pauline Medrano* 3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>See Itemized Attached List</i>	7 Amount of contribution (\$) <i>\$25,435.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code			

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date <i>4/23/05</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andy Reitingger</i> Contributor address; City; State; Zip Code <i>3960 Summit Ct. Fairview, TX 75069</i>	Amount of contribution (\$) <i>\$1000.00</i>	In-kind contribution description (if applicable) <i>T-shirts</i>
------------------------	--	---	---

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <i>5/20/05</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Vicki Reitingger</i> Contributor address; City; State; Zip Code <i>3960 Summit Ct Fairview, TX 75069</i>	Amount of contribution (\$) <i>\$1000.00</i>	In-kind contribution description (if applicable) <i>T-shirts</i>
------------------------	--	---	---

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			

Principal occupation / Job title (See Instructions) Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MEDRANO CAMPAIGN CONTRIBUTORS

042708

4/28/2005	Jackie D. Bewley	2515 Irving Blvd.	Dallas	75207	\$	1,000.00
5/17/2005	Southwest Airlines Co. Freedom Fund	P.O. Box 36611 HDQ 4GA	Dallas	75235	\$	500.00
5/16/2005	David L. Millet	1000 So. Ervay St.	Dallas	75201	\$	250.00
5/17/2005	Michael Moon, Christopher Valdez	3110 Urban Avenue	Dallas	75227	\$	10.00
5/9/2005	James Humrichouse	7964 Xavier Ct.	Dallas	75218-4512	\$	75.00
5/17/2005	Gloria Torres	5103 Denton Drive.	Dallas	75235	\$	50.00
5/16/2005	Lupe Valdez	707 N. Edgefield	Dallas	75208	\$	50.00
5/16/2005	Sara Lee Huebner	8728 Glencrest	Dallas	75209	\$	250.00
5/16/2005	Daniel M. Millet	1000 S. Ervay St.	Dallas	75201	\$	250.00
5/19/2005	Janice Browning	P.O. Box 721056	Dallas	75372-1056	\$	25.00
4/28/2005	Alfredo Hinojosa	18023 Rock Branch Dr.	Dallas	75287-6856	\$	1,000.00
5/3/2005	Amalgated Transit Union	5025 Wisconsin Ave NW	Washington	20016-4139	\$	200.00
4/29/2005	Virginia McAlester	5703 Swiss Ave.	Dallas	75214	\$	250.00
5/3/2005	Richard R. Rogers	16251 Dallas Parkway	Dallas	75248	\$	500.00
4/29/2005	Ray L. Hunt	1445 Ross Ave. Suite 1500	Dallas	75202	\$	500.00
5/6/2005	Anthony Hunt	7009 Cliffwood	Dallas	75237	\$	500.00
4/29/2005	Mike Arbour	10831 Cinderella Ln.	Dallas	75229	\$	500.00
4/30/2005	Esther Contreras	413 E. Center St.	Duncanville	75116-4806	\$	100.00
4/29/2005	Stephanie S. Green	5812 Lewis Street	Dallas	75206	\$	75.00
5/5/2005	Richard Knight, Jr.	6108 Red Bird	Dallas	75232	\$	200.00
4/29/2005	Michelle Allums	4209 Shenandoah	Dallas	75205	\$	200.00
4/29/2005	Todd Cook	5537 Naaman Forest #1423	Garland	75044	\$	150.00
4/29/2005	Rosanne Pittman	8820 Lacrosse	Dallas	75231	\$	75.00
5/7/2005	Sandy Josephson	152 Winchester Dr.	Eules	76039	\$	50.00
5/9/2005	Don Maison	P.O. Box 192671	Dallas	75219-8525	\$	100.00
5/10/2005	Howard Hallam	5330 S. Dentwood Dr.	Dallas	75220	\$	100.00
5/13/2005	Pete Webb	3313 Throckmorton St. #B	Dallas	75219	\$	25.00
5/14/2005	J. Shannon Bailey	8142 Woodhue Rd.	Dallas	75228-5900	\$	50.00
5/6/2005	Gerald Stool	2808 Fairmount St. Ste 100	Dallas	75201	\$	1,000.00
5/10/2005	Dallas Fire Fighters Public Safety Comm.	P.O. Box 225437	Dallas	75222-5437	\$	1,000.00
5/12/2005	Charles J. Wyly, Jr.	300 Crescent Ct. Ste. 1000	Dallas	75201	\$	1,000.00
5/15/2005	Joel Maten	12333 Brittany Circle	Dallas	75230-2258	\$	1,000.00
4/29/2005	Donald J. McNamara	3232 McKinney Ave. Suite 890	Dallas	75204	\$	200.00
5/20/2005	Harlan Crow	2100 McKinney Ave. Ste. 700	Dallas	75201	\$	500.00
5/17/2005	Gina Norris	3641 Mockingbird Ln.	Dallas	75205-2157	\$	100.00
5/20/2005	G. David Carlock	8111 Preston Rd. Ste. 550	Dallas	75225-6381	\$	100.00
5/25/2005	Martin W. Burrell	P.O. Box 764516	Dallas	75376	\$	300.00

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MEDRANO CAMPAIGN CONTRIBUTORS

5/25/2005	John Mosqueda	413 E. Center St.	Duncanville	75116-4806	\$100.00
5/25/2005	Patricia Thorstens White	4714 Wildwood Rd.	Dallas	75209	\$200.00
5/23/2005	Emily Beer	913 Vinecrest	Richardson	75080	\$300.00
5/24/2005	Mamiliano Rodriguez	5939 Meadow Crest Dr.	Dallas	75230	\$250.00
5/26/2005	Steven A. Okon	5844 Preston Haven	Dallas	75230	\$500.00
5/26/2005	Louis Okon	5844 Preston Haven	Dallas	75230	\$500.00
5/24/2005	William Winspear	3505 Turtle Creek #18-A	Dallas	75219	\$1,000.00
5/26/2005	Demetris Simpson	2207 Elderoaks Ln.	Dallas	75232	\$1,000.00
5/26/2005	Howard Okon	4433 N. Hall	Dallas	75219	\$500.00
5/26/2005	David Gabbay	4624 Cedar Springs Rd.	Dallas	75219	\$250.00
5/26/2005	Kathy Vergos	162 Leda Dr.	Dallas	75218	\$200.00
5/24/2005	Ben Muro	7106 Lakehurst	Dallas	75230	\$100.00
5/24/2005	Cipriano Munoz	2655 Freewood	Dallas	75220	\$100.00
5/25/2005	Tom Lazo	4818 Mill Run Rd.	Dallas	75244-6527	\$250.00
5/26/2005	Trammell Crow	4500 Preston Rd.	Dallas	75205	\$500.00
5/26/2005	Real Estate Council Community Leadership Council	8117 Preston Rd. Suite 750	Dallas	75225	\$500.00
5/26/2005	Caren H. Prothro	3929 Potomac Ave.	Dallas	75205	\$250.00
5/26/2005	Alex Jimenez	245 Willow Ridge Road	Ft. Worth	76103	\$100.00
5/26/2005	Apartment Association of Greater Dallas - PAC	4230 LBJ Frwy Suite 140	Dallas	75244	\$2,500.00
5/26/2005	Ronald Steinhart	25 Robledo	Dallas	75230	\$100.00
5/27/2005	Jeff Brawner	4364 San Carlos	Dallas	75205	\$100
5/27/2005	Adelfa Callejo	4314 N. Central Expwy.	Dallas	75206	\$250.00
5/27/2005	Dallas Police Officers PAC	1412 Griffin St. East	Dallas	75215	\$500.00
5/27/2005	Tom Dunning	717 N. Harwood, Suite 2500	Dallas	75201	\$250.00
5/27/2005	William Metzger	4428 Ivy Dr.	Mesquite	75150	\$100.00
5/27/2005	Frank Mihalopoulos	10311 Garwood	Dallas	75238	\$250.00
5/27/2005	Anastasia Semos	1939 W. Colorado	Dallas	75208	\$50.00
5/27/2005	James D. Sturgis	4217 Nasmyth Dr.	Plano	75093	\$50.00
5/27/2005	Thomas Gillis	3921 Shenandoah	Dallas	75205	\$100.00
5/27/2005	Roslyn Thompson	2 Abbotsford Court	Dallas	75225	\$100.00
5/27/2005	Robert H. Todd	7640 W. Greenway, No 5-P	Dallas	75209	\$200.00
5/27/2005	Metrotex Association of Realtors PAC	8201 N. Stemmons Freeway	Dallas	75247	\$1,500.00
5/27/2005	Ronal Wheeler	2022 S. Village Dr.	Bonham	75418	\$50.00
5/27/2005	Cynthia Calhoun	1745 Tamarack	Dallas	75228	\$150.00
5/27/2005	George Shafer	400 E. Carpenter Frewy.	Irving	75026	\$250.00
5/27/2005	Ray Wooldridge	788 Glen Shuman Creek	Dallas	75225	\$100.00

\$25,435.00

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: <p style="text-align: center;">11</p>
<b>2</b> FILER NAME <p style="font-size: 1.2em;">Pauline Medrano</p>		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date <p style="font-size: 1.2em;">5-4-05</p>	<b>5</b> Payee name <p style="font-size: 1.2em;">JMH Printing</p>	<b>7</b> Amount (\$) <p style="font-size: 1.2em;">\$ 2,080.94</p>
<b>6</b> Payee address; City; State; Zip Code <p style="font-size: 1.2em;">721 West Tarrant Rd. Grand Prairie, TX 75050</p>		
<b>8</b> Purpose of payment (See instructions regarding type of information required.) <p style="font-size: 1.2em;">Printing- campaign literature</p>		<b>9</b> <small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name      Office sought      Office held
Date <p style="font-size: 1.2em;">5-17-05</p>	Payee name <p style="font-size: 1.2em;">JMH Printing</p>	Amount (\$) <p style="font-size: 1.2em;">\$1,636.13</p>
Payee address; City; State; Zip Code <p style="font-size: 1.2em;">721 West Tarrant Rd. Grand Prairie, TX 75050</p>		
Purpose of payment (See instructions regarding type of information required.) <p style="font-size: 1.2em;">Printing- campaign literature</p>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name      Office sought      Office held
Date <p style="font-size: 1.2em;">5-14-05</p>	Payee name <p style="font-size: 1.2em;">JMH Printing</p>	Amount (\$) <p style="font-size: 1.2em;">\$1,334.12</p>
Payee address; City; State; Zip Code <p style="font-size: 1.2em;">721 West Tarrant Rd. Grand Prairie, TX 75050</p>		
Purpose of payment (See instructions regarding type of information required.) <p style="font-size: 1.2em;">Printing- campaign literature</p>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name      Office sought      Office held
Date <p style="font-size: 1.2em;">4-29-05</p>	Payee name <p style="font-size: 1.2em;">The Order Desk</p>	Amount (\$) <p style="font-size: 1.2em;">\$565.72</p>
Payee address; City; State; Zip Code <p style="font-size: 1.2em;">2910 Canton St. Dallas, TX 75226</p>		
Purpose of payment (See instructions regarding type of information required.) <p style="font-size: 1.2em;">mail service</p>		<small>** Complete if direct expenditure to benefit C/OH **</small> Candidate / Officeholder name      Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		<b>000006</b>

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Pauline Modrano

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

5-6-05

The Order Desk

6 Payee address; City; State; Zip Code

2910 Canton St.  
Dallas, TX 75226

\$ 1807.10

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

Mail service

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-19-05

The Order Desk

Payee address; City; State; Zip Code

2910 Canton St.  
Dallas, TX 75226

\$ 899.84

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

Mail service.

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-6-05

Dallas Voice

Payee address; City; State; Zip Code

4145 Travis Street, 3rd Floor  
Dallas, TX 75204-1830

\$ 1,076.00

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

Advertising

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-6-05

El Sol de Texas, Inc.

Payee address; City; State; Zip Code

2526 W. Mockingbird Ln.  
Dallas, TX 75235-5629

\$ 600.00

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

Advertising

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

000007

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME Pauline Medrano		3 ACCOUNT # (Ethics Commission filers)
4 Date 5-4-05	5 Payee name Aire Designs of Texas 6 Payee address; City; State; Zip Code 1521 Chesterfield Drive Carrollton, TX 75007	7 Amount (\$) \$303.10
8 Purpose of payment (See instructions regarding type of information required.) Decorations		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5-13-05	Payee name O-K Paper Center Payee address; City; State; Zip Code 500 N. Griffin St. Dallas, TX 75202	Amount (\$) \$401.01
Purpose of payment (See instructions regarding type of information required.) Envelopes, paper		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5-20-05	Payee name O-K Paper Center Payee address; City; State; Zip Code 500 N. Griffin St. Dallas, TX 75202	Amount (\$) \$20.64
Purpose of payment (See instructions regarding type of information required.) Doorhangers		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5-23-05	Payee name KHVN Payee address; City; State; Zip Code 5787 South Hampton Rd. Suite 285 Dallas, TX 75232	Amount (\$) \$1500.00
Purpose of payment (See instructions regarding type of information required.) Radio Ads		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		000003

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Pauline Medrano

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

5-13-05

Clear Channel

6 Payee address; City; State; Zip Code

3700 E. Randol Mill Rd.  
Arlington, TX 76011

\$ 1,195.00

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

Billboards

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-10-05

Ed Zachow

Payee address; City; State; Zip Code

604 Fuller Dr.  
Cedar Hill, TX 75104

\$ 500.00

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

Graphics

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-23-05

Service Broadcasting

Payee address; City; State; Zip Code

\$ 3500.00

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

Radio ads

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

5-25-05

AMAC Productions

Payee address; City; State; Zip Code

\$ 750.00

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

Producing Radio Ads.

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

000003

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Pauline Medrano</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>5/4/05</i>	5 Payee name <i>Office Depot</i>	7 Amount (\$) <i>\$ 155.92</i>
6 Payee address; City; State; Zip Code <i>2929 Oak lawn Ave Dallas TX 75219</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/6/05</i>	Payee name <i>Office Depot</i>	Amount (\$) <i>\$ 95.02</i>
Payee address; City; State; Zip Code <i>2929 Oak lawn Ave. Dallas, TX 75219</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies.</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/13/05</i>	Payee name <i>Office Depot</i>	Amount (\$) <i>\$ 57.65</i>
Payee address; City; State; Zip Code <i>2929 Oak lawn Ave. Dallas, TX 75219</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>4/30/05</i>	Payee name <i>Office Depot</i>	Amount (\$) <i>\$ 51.40</i>
Payee address; City; State; Zip Code <i>2929 Oak lawn Ave. Dallas, TX 75219</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		<b>000010</b>

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Pauline Medrano</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>5/16/05</i>	5 Payee name <i>Office Depot</i>	7 Amount (\$) <i>\$33.76</i>
6 Payee address; City; State; Zip Code <i>2929 Oak Lawn Ave. Dallas, TX 75219</i>		
8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/23/05</i>	Payee name <i>Office Depot</i>	Amount (\$) <i>\$40.64</i>
Payee address; City; State; Zip Code <i>701 S. Industrial Blvd. Euless, TX 76040</i>		
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/2/05</i>	Payee name <i>USPS</i>	Amount (\$) <i>\$98.40</i>
Payee address; City; State; Zip Code <i>Dallas MPO store A Dallas, TX 75222-9991</i>		
Purpose of payment (See instructions regarding type of information required.) <i>stamps</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/16/05</i>	Payee name <i>USPS</i>	Amount (\$) <i>\$666.00</i>
Payee address; City; State; Zip Code <i>Dallas MPO store A Dallas, TX 75222-9991</i>		
Purpose of payment (See instructions regarding type of information required.) <i>stamps</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		<b>000011</b>

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Pauline Medrano

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

5/15/05

USPS

6 Payee address; City; State; Zip Code

Dallas MPO Store A  
Dallas, TX 75222-9991

\$ 925.00

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

stamps

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

Date

Payee name

Amount (\$)

5/14/05

Black-eyed Pea #2001

Payee address; City; State; Zip Code

3857 Cedar Springs  
Dallas, TX 75219

\$ 158.86

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

Volunteer meeting

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

4/28/05

Dunston's Steak House

Payee address; City; State; Zip Code

8526 Harry Hines Blvd.  
Dallas, TX 75235

\$ 133.55

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

Volunteer meeting.

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

4/30/05

El Ranchito

Payee address; City; State; Zip Code

610 W. Jefferson  
Dallas, TX 75208

\$ 116.05

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

Volunteer meeting

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME Pauline Medrano		3 ACCOUNT # (Ethics Commission filers)
4 Date 5/15/05	5 Payee name Cjeda's 6 Payee address; City; State; Zip Code 4617 Maple Ave. Dallas, TX 75219	7 Amount (\$) \$ 87.32
8 Purpose of payment (See instructions regarding type of information required.) Volunteer Meeting		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 5/10/05	Payee name Sal's Payee address; City; State; Zip Code 2525 Wycliff Ave. Dallas, TX 75219	Amount (\$) \$ 74.78
Purpose of payment (See instructions regarding type of information required.) Volunteer Meeting		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 5/2/05	Payee name Snookie's Payee address; City; State; Zip Code 3604 Oak Lawn Dallas, TX 75219	Amount (\$) \$ 56.29
Purpose of payment (See instructions regarding type of information required.) Volunteer Meeting		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 5/6/05	Payee name Sam's Club Payee address; City; State; Zip Code 1959 West NW Hwy Dallas, TX	Amount (\$) \$ 301.09
Purpose of payment (See instructions regarding type of information required.) Food		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		000013

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**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME Pauline Medrano		3 ACCOUNT # (Ethics Commission filers)
4 Date 5/16/05	5 Payee name Adams BBQ 6 Payee address; City; State; Zip Code 1971 Singleton Blvd. Dallas, TX 75212	7 Amount (\$) \$116.37
8 Purpose of payment (See instructions regarding type of information required.) Volunteer mtg.		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5/24/05	Payee name USPS Payee address; City; State; Zip Code Dallas MPO Store A Dallas, TX 75222-9991	Amount (\$) \$185.00
Purpose of payment (See instructions regarding type of information required.) Stamps		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5/13/05	Payee name Office Depot Payee address; City; State; Zip Code 7929 Oaklawn Ave. Dallas, TX 75219	Amount (\$) \$160.19
Purpose of payment (See instructions regarding type of information required.) office supplies		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 5/6/05	Payee name Office Depot Payee address; City; State; Zip Code 7929 Oaklawn Ave. Dallas, TX 75219	Amount (\$) \$342.44
Purpose of payment (See instructions regarding type of information required.) office supplies		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		000014

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>Pauline Medrano</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>5/18/05</i>	5 Payee name <i>Office Depot</i> 6 Payee address; City; State; Zip Code <i>2929 Oak Lawn Dallas, TX 75219</i>	7 Amount (\$) <i>\$ 416.71</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/24/05</i>	Payee name <i>Office Depot</i> Payee address; City; State; Zip Code <i>2929 Oak Lawn Dallas, TX 75219</i>	Amount (\$) <i>\$ 220.88</i>
Purpose of payment (See instructions regarding type of information required.) <i>office supplies</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/17/05</i>	Payee name <i>hpshopping.com</i> Payee address; City; State; Zip Code	Amount (\$) <i>\$ 173.99</i>
Purpose of payment (See instructions regarding type of information required.) <i>printer image drum</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
Date <i>5/17/05</i>	Payee name <i>hpshopping.com</i> Payee address; City; State; Zip Code	Amount (\$) <i>\$ 198.98</i>
Purpose of payment (See instructions regarding type of information required.) <i>printer image drum</i>		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name      Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		<b>000015</b>

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Pauline Medrano

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/30/05

5 Payee name

hpshopping.com

7 Amount (\$)

\$203.98

6 Payee address; City; State; Zip Code

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

printer imaging drum

9 -- Complete if direct expenditure to benefit C/OH --  
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.)

-- Complete if direct expenditure to benefit C/OH --  
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.)

-- Complete if direct expenditure to benefit C/OH --  
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.)

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

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