

060046

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME RON NATINSKY 16 ACCOUNT # (Ethics Commission Bars)

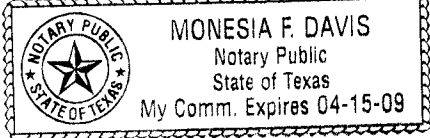
17 NOTICE FROM POLITICAL COMMITTEE(S)

-- 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. --

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ - 0 -
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,039.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 33,550.05
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ < 2694.52 >
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 40,000.00

19 AFFIDAVIT



MONESIA F. DAVIS
Notary Public
State of Texas
My Comm. Expires 04-15-09

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.

Ron Natinsky
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ron Natinsky, this the 17th day of January, 2007, to certify which, witness my hand and seal of office.

Monesia F. Davis
Signature of officer administering oath

Monesia F. Davis
Printed name of officer administering oath

Notary
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: 18	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission files)	
4 Date 8-2-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WILLIAM + HOLLY BECKER	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 9310 DARTWOOD LANE DALLAS, TX 75225			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-2-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAUL + RAELEINE RADNITZ	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4707 STONEHOLLOW WAY DALLAS TX 75287			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-2-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARY HARTSTEIN	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5101 CORAL COVE CT PLANO TX 75093			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-2-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARY HARTSTEIN	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5101 CORAL COVE CT PLANO, TX 75093			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-2-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAUL RADNITZ	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4707 STONEHOLLOW WAY DALLAS 75287			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

060046

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form. **1** Total pages Schedule A:

2 FILER NAME **3** ACCOUNT # (Ethics Commission files)
RON NATINSKY

4 Date **5** Full name of contributor out-of-state PAC (ID#:
8-2-05 PHILIP RITTER
6 Contributor address; City; State; Zip Code
10824 ALADDIN DR
DALLAS TX 75229
7 Amount of contribution (\$) 100.00
8 In-kind contribution description (if applicable)

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

Date Full name of contributor out-of-state PAC (ID#:
8-10-05 GARRET + SANDY JAMISON
Contributor address; City; State; Zip Code
5208 TANBARK RD
DALLAS 75229
Amount of contribution (\$) 1000.00
In-kind contribution description (if applicable)

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

Date Full name of contributor out-of-state PAC (ID#:
8-10-05 LUCY BILLINGSLEY
Contributor address; City; State; Zip Code
4100 INTERNATIONAL PKWY #1100
CARROLLTON, TX 75007
Amount of contribution (\$) 125.00
In-kind contribution description (if applicable)

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

Date Full name of contributor out-of-state PAC (ID#:
8-10-05 DAVID BIEGLER
Contributor address; City; State; Zip Code
1700 PACIFIC # 2920
DALLAS 75201
Amount of contribution (\$) 125.00
In-kind contribution description (if applicable)

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

Date Full name of contributor out-of-state PAC (ID#:
8-10-05 CAROL BRACKEN
Contributor address; City; State; Zip Code
5913 MALMESBURY
DALLAS TX 75282
Amount of contribution (\$) 125.00
In-kind contribution description (if applicable)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED 000004
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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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 A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission files)	
4 Date 8-10-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BOB RICHARD	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7240 WHISPERING PINES DALLAS 75248			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DAN PETTY	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5808 PORTSMOUTH DALLAS 75252			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GEORGE SHAFER	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11711 FOREST CT DALLAS 75230			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: CHARLES + BARBARA VAUGHN	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5620 SHUBERT CT DALLAS 75252			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: YVONNE REISMAN	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7224 HELSEM BEND DALLAS 75230			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission files)	
4 Date 8-10-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RICHARD BROWN	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5812 RICHWATER DR DALLAS 75252			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARV + JOAN LANE	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7715 FALLMEADOW LN DALLAS TX 75248			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOE ALCANTOR	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7726 MARQUETTE DALLAS 75225			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT + CAROLEE BLUMIN	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5723 WORTHAM DALLAS 75252			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JACK + LIBBY SWINDLE	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5751 WORTHAM DALLAS 75252			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission files)	
4 Date 8-10-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JIM + PAT MITCHELL 6 Contributor address; City; State; Zip Code 7616 DUNLEER WAY DALLAS 75248	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-10-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HOMER + CATHIE ADAMS Contributor address; City; State; Zip Code 5833 PORTSMOUTH LN DALLAS 75252	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DUB + MARY LOU ANDERSON Contributor address; City; State; Zip Code 6615 REGALBLUFF DR DALLAS 75248	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOE + DENISE SHADE Contributor address; City; State; Zip Code 5905 CLUB OAKS DR DALLAS 75248	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SKIP TRIMBLE Contributor address; City; State; Zip Code 8333 DOUGLAS AVE #1350 DALLAS 75225	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission files)	
4 Date 8-15-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: STACY R STEPHENS MD	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5936 GLADESIDE CT DALLAS 75248			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: KEN MENGES	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1700 PACIFIC AVE # 4100 DALLAS 75201			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARU + TRICIA MCFARLAND	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7708 BRIARIDGE DALLAS 75248			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LEE + MARIA BEIKMAN	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5042 WESTGROVE DALLAS 75248			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARY + CHARLES KIL	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 148 RED OAK LN FLOWER MOUND, 75028			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.				1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY				3 ACCOUNT # (Ethics Commission files)	
4 Date 8-15-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JUDITH + AVELINO SEGURA	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)		
6 Contributor address; City, State; Zip Code 6810 HARVEST GLEN DR DALLAS TX 75248					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RENEE RIGGS	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)		
Contributor address; City, State; Zip Code 3105 SAN JACINTO #217 DALLAS 75204					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WALKER + ELAINE HARMAN	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)		
Contributor address; City, State; Zip Code 3713 SOUTHWESTERN DALLAS 75225					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GERRY + SUSAN URBACH	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)		
Contributor address; City, State; Zip Code 7049 GATERIDGE DALLAS 75254					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BEVERLY + BOB STRAUSS	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)		
Contributor address; City, State; Zip Code 7009 SPANKY BRANCH DALLAS TX 75248					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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Texas Ethics Commission

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.				1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY				3 ACCOUNT # (Ethics Commission Uses)	
4 Date 8-15-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: KATHY INGLE	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)		
6 Contributor address; City; State; Zip Code 4055 COCHRAN CHAPEL RD DALLAS TX 75209					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: VANCE C MILLER	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 5001 SPRING VALLEY RD. 1100W DALLAS TX 75244					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ALLAN + SANDY CANTOR	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 6618 WINDING ROSE TRAIL DALLAS TX 75252					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOHN + BEVERLY STAEDKE	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 5826 PORTSMOUTH LN DALLAS TX 75252					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ERLE NYE	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 12211 CREEK FOREST DALLAS TX 75230					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission Uses)	
4 Date 8-15-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WALT + PEGGY LAIDLAW	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5708 ARCHER CT. DALLAS 75252			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAUL + TRICIA MICHAELSON	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6808 MEADOWCREEK DR DALLAS 75234			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-17-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LEE HALFORD JR	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9623 VIEWSIDE DALLAS TX 75231			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-17-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DAN WEISER	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3851 RUGGED CIRCLE DALLAS 75224			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8-17-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RONALD G STEINHART	Amount of contribution (\$) 125.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 25 ROBLEDO DR DALLAS 75230			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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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 A

The instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

RON NATINSKY

3 ACCOUNT # (Ethics Commission files)

4 Date

8-17-05

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

STEVEN M. BURKE

6 Contributor address; City; State; Zip Code

1342 HEATHERMORE
DALLAS 75248

7 Amount of contribution (\$)

125.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8-17-05

Full name of contributor out-of-state PAC (ID# _____)

RODNEY SCHLOSSER

Contributor address; City; State; Zip Code

7340 WILLIAMS WOOD DR
DALLAS 75252

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-17-05

Full name of contributor out-of-state PAC (ID# _____)

JIM ROGERS

Contributor address; City; State; Zip Code

3208 TREVOLLE
DALLAS 75204

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-17-05

Full name of contributor out-of-state PAC (ID# _____)

LINDA + LARRY CAMIN

Contributor address; City; State; Zip Code

16502 FALLKIRK DR.
DALLAS 75248

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-17-05

Full name of contributor out-of-state PAC (ID# _____)

NELDA NEALE

Contributor address; City; State; Zip Code

5616 SHUBERT CT
DALLAS 75252

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME
RON NATINSKY

3 ACCOUNT # (Ethics Commission files)

4 Date
8-17-05

5 Full name of contributor out-of-state PAC (ID#:
ONIE SIMMONS

7 Amount of contribution (\$)
30.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
**6804 GLENSTAR
DALLAS 75252**

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
8-17-05

Full name of contributor out-of-state PAC (ID#:
MICHAEL H. ANDERSON

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**6446 PRESTONSHIRE LN
DALLAS 75225**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-17-05

Full name of contributor out-of-state PAC (ID#:
DAN + JOANN MESSINA

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**6234 LA COSA
DALLAS 75248**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-17-05

Full name of contributor out-of-state PAC (ID#:
RANDY + NANCY ADDISON

Amount of contribution (\$)
250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**17244 LECHLADE LN
DALLAS 75252**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-17-05

Full name of contributor out-of-state PAC (ID#:
JEROLD + FRANKIE MICHAELSON

Amount of contribution (\$)
125.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**6716 REGALBLUFF
DALLAS 75248**

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.

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

RON NATINSKY

3 ACCOUNT # (Ethics Commission files)

4 Date

8-22-05

5 Full name of contributor

out-of-state PAC (ID#)

ROGER GAULT

6 Contributor address; City; State; Zip Code

10406 KOKO HEAD CIRCLE
DALLAS 75218

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8-22-05

Full name of contributor

out-of-state PAC (ID#)

DAVID WUL

Contributor address; City; State; Zip Code

5113 TENNINGTON PARK
DALLAS 75287

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-22-05

Full name of contributor

out-of-state PAC (ID#)

DAVID ARBUCKLE

Contributor address; City; State; Zip Code

1054 EAGLE RIDGE DR.
EL PASO TX 79912

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-22-05

Full name of contributor

out-of-state PAC (ID#)

LISA LEMASTER

Contributor address; City; State; Zip Code

4311 NORTHAVEN RD
DALLAS 75229

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-22-05

Full name of contributor

out-of-state PAC (ID#)

ROSE + DALE HARDER

Contributor address; City; State; Zip Code

7306 HEATHERMORE DR.
DALLAS 75248

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

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.

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060046

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form. **1** Total pages Schedule A:

2 FILER NAME: RON NATINSKY **3** ACCOUNT # (Ethics Commission files):

4 Date: 8-2-05 **5** Full name of contributor: out-of-state PAC (ID#): WILLIAM + HOLLY BECKER
6 Contributor address; City; State; Zip Code: 4310 DARTWOOD LANE DALLAS **7** Amount of contribution (\$): 500.00 **8** In-kind contribution description (if applicable):

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

Date: 8-22-05 Full name of contributor: out-of-state PAC (ID#): BRIAN LESLIE
Contributor address; City; State; Zip Code: 5526 ANITA ST DALLAS TX 75206 Amount of contribution (\$): 125.00 In-kind contribution description (if applicable):

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

Date: 8-22-05 Full name of contributor: out-of-state PAC (ID#): LOPEZGARCIA GROUP - PAC
Contributor address; City; State; Zip Code: 1825 MARKET CENTER BLD#150 DALLAS 75207 Amount of contribution (\$): 125.00 In-kind contribution description (if applicable):

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

Date: 8-22-05 Full name of contributor: out-of-state PAC (ID#): DICK + LUCIE BELEW
Contributor address; City; State; Zip Code: 7328 WILLIAMSWOOD DR DALLAS 75252 Amount of contribution (\$): 100.00 In-kind contribution description (if applicable):

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

Date: 8-22-05 Full name of contributor: out-of-state PAC (ID#): BERNARD MALDONADO
Contributor address; City; State; Zip Code: 6712 SUMMER MEADOW DALLAS 75252 Amount of contribution (\$): 200.00 In-kind contribution description (if applicable):

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

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

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The instruction Guide explains how to complete this form.

1 Total pages Schedule A:**2** FILER NAME

RON NATINSKY

3 ACCOUNT # (Ethics Commission Uses)**4** Date

8-22-05

5 Full name of contributor out-of-state PAC (ID#:

PAM + TIM COUCH

6 Contributor address: City: State: Zip Code5747 WORTHAM LANE
DALLAS 75252**7** Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

8-26-05

Full name of contributor out-of-state PAC (ID#:

BARBARA + MYRON WEINSTEIN

Contributor address: City: State: Zip Code

16131 RED CEDAR TRAIL
DALLAS 75248

Amount of contribution (\$)

125.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-26-05

Full name of contributor out-of-state PAC (ID#:

JACKSON WALKER PAC

Contributor address: City: State: Zip Code

901 MAIN ST #6000
DALLAS 75202

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9-8-05

Full name of contributor out-of-state PAC (ID#:

JAY + MAIJA SALEM

Contributor address: City: State: Zip Code

5505 PRESTWICK LN
DALLAS 75252

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9-8-05

Full name of contributor out-of-state PAC (ID#:

DWAYNE JONES

Contributor address: City: State: Zip Code

PO BOX 191784
DALLAS TX 75219

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

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.

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060046

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The instruction Guide explains how to complete this form.				1 Total pages Schedule A:	
2 FILER NAME RON NATINSKY				3 ACCOUNT # (Ethics Commission files)	
4 Date 9-8-05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARK A. SHERTER	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)		
6 Contributor address; City; State; Zip Code 3615 N. HALL DALLAS 75219					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 9-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DALLAS POLICE OFFICERS PAC	Amount of contribution (\$) 750.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 1412 GRIFFIN ST E DALLAS 75215					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 9-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SHELLY + NATALIE FRANKEL	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 5709 PORTSMOUTH LN DALLAS 75252					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 9-15-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DENNIS BURNHAM	Amount of contribution (\$) 249.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 7522 CAMPBELL RD # 113-178 DALLAS 75248					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 9-24-05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: APT. ASSOC. OF GREATER DALLAS PAC	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)		
Contributor address; City; State; Zip Code 4230 LBJ #140 DALLAS 75244					
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.

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

RON NATINSKY

3 ACCOUNT # (Ethics Commission files)

4 Date

9-29-05

5 Full name of contributor out-of-state PAC (ID#:

JUDY + PAUL WHITMAN

6 Contributor address; City; State; Zip Code

7719 CARUTH BLD
DALLAS 75225

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10-31-05

Full name of contributor out-of-state PAC (ID#:

DAVID ALEXANDER

Contributor address; City; State; Zip Code

3821 GREENBRIAR
DALLAS 75225

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10-31-05

Full name of contributor out-of-state PAC (ID#:

PETE SCHENKEL

Contributor address; City; State; Zip Code

2515 MCKINNEY # 1200
DALLAS 75201

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-07-05

Full name of contributor out-of-state PAC (ID#:

VINSON + ELKINS PAC

Contributor address; City; State; Zip Code

3700 TRAMMEL CROW CTR
2100 ROSS AVE
DALLAS 75201

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-07-05

Full name of contributor out-of-state PAC (ID#:

J. C. MONTGOMERY JR.

Contributor address; City; State; Zip Code

11526 WICKS CIRCLE
DALLAS 75230

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

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.

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

RON NATINSKY

3 ACCOUNT # (Ethics Commission files)

4 Date

11-07-05

5 Full name of contributor

HOWARD HALAM

out-of-state PAC (ID#)

6 Contributor address; City; State; Zip Code

5330 S. DENTWOOD DR
DALLAS 75220

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11-18-05

Full name of contributor

TIM BYRNE

out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

500 N. AKARD
DALLAS 75201

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-18-05

Full name of contributor

COMERICA INC. PAC

out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

MC 6507
POB 650282
DALLAS 75265

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-18-05

Full name of contributor

TOM DUNNING

out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

9239 HATHAWAY
DALLAS 75220

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-18-05

Full name of contributor

RAY HUNT

out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

1445 ROSS AVE #1500
DALLAS 75202

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

(512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 3
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-5-05	5 Payee name RENEE RIGGS	7 Amount (\$) 4052²⁵
6 Payee address; City: State: Zip Code 3105 SAN JACINTO #217 DALLAS 75204		
8 Purpose of payment (See instructions regarding type of information required.) CONSULTING + PARTY EXPENSE		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 7-7-05	Payee name STERLING SERVICES	Amount (\$) 1831²⁰
Payee address; City: State: Zip Code P.O. Box 190511 DALLAS 75219		
Purpose of payment (See instructions regarding type of information required.) PREPARE LETTER, STATIONERY + ENVELOPES		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 7-7-05	Payee name MURPHY TURNER + ASSOC.	Amount (\$) 5286²⁶
Payee address; City: State: Zip Code 816 CONGRESS AVE # 1160 AUSTIN 78701		
Purpose of payment (See instructions regarding type of information required.) PRINTING, FULLFILLMENT + POSTAGE		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 7-26-05	Payee name LORLEE BARTOS	Amount (\$) 10,000⁰⁰
Payee address; City: State: Zip Code 3211 CULVER DALLAS 75223		
Purpose of payment (See instructions regarding type of information required.) CONSULTING		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		
		000021

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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 RON NATINSKY		3 ACCOUNT # (Ethics Commission filers)	
4 Date 8-15-05	5 Payee name CUTOPIA	7 Amount (\$) 50.00	
6 Payee address; City; State; Zip Code 7070 WINDHAVEN PKWY #102 THE COLONY TX 75056			
8 Purpose of payment (See instructions regarding type of information required.) WEB WORK		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held	
Date 8-15-05	Payee name PRINT COMM	Amount (\$) 1578 ²⁸	
Payee address; City; State; Zip Code 9171 KING ARTHUR DALLAS TX 75247			
Purpose of payment (See instructions regarding type of information required.) PRINTING		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held	
Date 8-15-05	Payee name PRINT COMM	Amount (\$) 2837 ²⁴	
Payee address; City; State; Zip Code 9171 KING ARTHUR DALLAS TX 75247			
Purpose of payment (See instructions regarding type of information required.) PRINTING		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held	
Date 8-15-05	Payee name KARLA LEAPHART	Amount (\$) 430. ⁰⁰	
Payee address; City; State; Zip Code 4817 BLUFFDAVE DALLAS TX 75218			
Purpose of payment (See instructions regarding type of information required.) ART-GRAPHICS		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED			000022

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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: RON NATINSKY 3 ACCOUNT # (Ethics Commission filers)

4 Date: 8-15-05 5 Payee name: MAIL TODAY 6 Payee address: 252 COMSTOCK ST. DALLAS TX 75208 7 Amount (\$): 1202.55

8 Purpose of payment: MAILING POSTAGE 9 -- Complete if direct expenditure to benefit C/OH --

Date: 8-19-05 Payee name: TONY COLEMAN Payee address: 6102 GASTON AVE DALLAS TX 75214 Amount (\$): 200.00

Purpose of payment: FUND RAISING PARTY -- Complete if direct expenditure to benefit C/OH --

Date: Payee name: MURPHY TURNER + ASSOC. Payee address: 816 CONGRESS AVE # 1160 AUSTIN TX 78701 Amount (\$): 4272.19

Purpose of payment: PHONE CALLS -- Complete if direct expenditure to benefit C/OH --

Date: Payee name: Payee address: City: State: Zip Code

Purpose of payment: -- Complete if direct expenditure to benefit C/OH --

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

(512) 463-5800 1-800-325-8506

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**
SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 2
2 FILER NAME RON NATINSKY		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-6-05	5 Payee name CAFE DE FRANCE (AEL) 6 Payee address: City: State: Zip Code 17370 PRESTON RD DALLAS 75252 7 Purpose of expenditure (See instructions regarding type of information required.) CONSULTING LUNCH	8 Amount (\$) 17.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8-8-05	Payee name USPS (AEL) Payee address: City: State: Zip Code PRESTONWOOD STATION DALLAS 75248 Purpose of expenditure (See instructions regarding type of information required.) STAMPS	Amount (\$) 90.59 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8-19-05	Payee name MAJESTIC LIQUOR (AEL) Payee address: City: State: Zip Code 900 HENDERSON ST PLANO 76102 Purpose of expenditure (See instructions regarding type of information required.) FUND RAISING PARTY	Amount (\$) 161.29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8-19-05	Payee name DUCKY BOB'S RENTAL (AEL) Payee address: City: State: Zip Code 3200 BELMEADE DR 1 75006 Purpose of expenditure (See instructions regarding type of information required.) FUND RAISING PARTY	Amount (\$) 192.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8-19-05	Payee name TOM THUMB (AEL) Payee address: City: State: Zip Code FRANKFORD + PRESTON DALLAS 75248 Purpose of expenditure (See instructions regarding type of information required.) FUND RAISING PARTY	Amount (\$) 159.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		000024

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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 FILER NAME <i>RON NATINSKY</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>8/27/05</i>	5 Payee name <i>HONKY'S HAMBURGER MAN (AEL)</i> 6 Payee address; City; State; Zip Code	8 Amount (\$) <i>1099.25</i>
	7 Purpose of expenditure (See instructions regarding type of information required.) <i>FUND RAISER</i>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>10/18/05</i>	Payee name <i>USPS (AEL)</i> Payee address; City; State; Zip Code <i>PRESTONWOOD STATION DALLAS 75248</i>	Amount (\$) <i>74.00</i>
	Purpose of expenditure (See instructions regarding type of information required.) <i>MAILING</i>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>1/30</i>	Payee name <i>ST. PETES (AEL)</i> Payee address; City; State; Zip Code <i>2730 COMMERCE DALLAS 75221</i>	Amount (\$) <i>16.00</i>
	Purpose of expenditure (See instructions regarding type of information required.) <i>CONSULTING LUNCH</i>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
	Purpose of expenditure (See instructions regarding type of information required.)	<input type="checkbox"/> Reimbursement from political contributions intended

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