

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 16	
3 COMMITTEE NAME Campaign to Elect Elton Mathis District Attorney			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address P O Box 443 Hempstead TX 77445			Date Received	
5 CAMPAIGN TREASURER NAME Mr. Gilbert Timothy Tim Junek			Receipt #	Amount
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business) 18069 FM 359 Hempstead TX 77445			Date Processed	
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address P O Box 443 Hempstead TX 77445			Date Imaged	
8 CAMPAIGN TREASURER PHONE (979) 826-3860				
9 REPORT TYPE <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination				
10 PERIOD COVERED Month Day Year 7 / 16 / 2006 THROUGH 10 / 10 / 2006				
11 ELECTION Month Day Year 11 / 7 / 2006 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special				
GO TO PAGE 2				

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

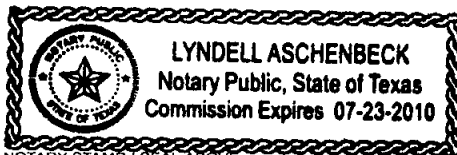
12 COMMITTEE NAME **Campaign to Elect Elton Mathis District Attorney** ACCOUNT # (Ethics Commission filers)

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME Elton R Mathis
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Waller County Criminal District Attorney
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # ELECTION DATE Month / Day / Year / /
		DESCRIPTION

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,150.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,477.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

15 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.



Tim Junek
Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Tim Junek**, this the **10th** day of **October**, 20 **06**, to certify which, witness my hand and seal of office.

Lyndell Aschenbeck
Signature of officer administering oath

LYNDELL ASCHENBECK
Printed name of officer administering oath

NOTARY PUBLIC
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 this Schedule A:
8

2 FILER NAME
Campaign to Elect Elton Mathis District Attorney 3 ACCOUNT # (Ethics Commission filers)

4 Date 8/16/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Mathis	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 23308 Mack Washington Hempstead TX 77445			

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

Date 8/16/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeanie Qualls	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 28 Hempstead TX 77445			

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

Date 8/16/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeanie Qualls	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 28 Hempstead TX 77445			

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

Date 8/17/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom or Johyne Rees	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 479 Hempstead TX 77445			

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

Date 8/16/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H H Prewett	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 43691 Austin Branch Road Hempstead TX 77445			

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.

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

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages this Schedule A:
8

2 FILER NAME **Campaign to Elect Elton Mathis District Attorney** 3 ACCOUNT # (Ethics Commission filers)

4 Date 8/18/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Ray Miller	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 43919 Austin Branch Road Hempstead TX 77445			

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

Date 8/22/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Stokes Jr	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 37438 FM 2979 Hempstead TX 77445			

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

Date 8/22/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Gage	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 41230 Kelly Road Hempstead TX 77445			

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

Date 8/22/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bo Hashaw	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 44 Windmill Drive Hempstead TX 77445			

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

Date 8/22/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard Insurance Agency	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 502 Hempstead TX 77445			

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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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 this Schedule A: 8	
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission files)	
4 Date 8/22/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne & Peggy McQuaid	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 39611 FM 1488 Hempstead TX 77445			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 8/28/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don & Mary Connor	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 67 Waller Tx 77484			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8/28/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odis or Susan Styers	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 67 Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8/28/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilford Sowell Jr	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 38402 FM 3346 Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8/28/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel D Davis	Amount of contribution (\$) 1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 410 Spring Lakes Haven Spring TX 77373			
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 this Schedule A: 8	
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/6/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fred Sargent	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1905 15th Street Hempstead TX 77445			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ted Krenek	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 491 Pattison TX 77466			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emeronce Kennedy	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 592 Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank O. Akins	Amount of contribution (\$) 400.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 12 Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/11/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Brown	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 16746 Brown Road Waller TX 77484			
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 this Schedule A: 8	
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/11/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elton Brownshadel	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 770 South Poad Oak Houston TX 77056			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W M Eplen	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 37184 Brumlow Road Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/11/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Howell	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 31778 Howell Road Waller TX 77484			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Howard	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2008 Pine Island Road Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dot Way	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 1158 Hempstead TX 77445			
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 this Schedule A: 8	
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/20/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsha K Wiesner	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 737 13th Street Hempstead TX 77445			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/22/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Zwernemann	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5086 Wright Road Katy TX 77493			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Brown	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 40834 Kelly Road Hempstead TX 77445			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cletus Brown Jr	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 578 Brookshire TX 77432			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican Party of Texas	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 900 Congress Avenue #300 Austin TX 78701			
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 this Schedule A:
8

2 FILER NAME **Campaign to Elect Elton Mathis District Attorney** 3 ACCOUNT # (Ethics Commission filers)

4 Date 10/6/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cliff & Christa Mallay	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 18069 Kerry Road Hempstead TX 77445			

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

Date 10/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don M. Garrett	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 28432 Hegar Road Hockley TX 77447			

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

Date 10/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. Black	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1111 McDade Hempstead TX 77445			

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

Date 10/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan Canales	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 878 Brookshire TX 77423			

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

Date 10/6/06	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louis Canales	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 878 Brookshire TX 77423			

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 this Schedule A: 8	
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/6/06	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bo Hashaw	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 44 Windmill Drive Hempstead TX 77445			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
X			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
X			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
X			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
X			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
X			
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

LOANS		SCHEDULE E
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$
5 Date of loan 9-12-2005	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Tim & Jill Junek	9 Loan Amount (\$) 10,000.00
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 18069 FM 359 Hempstead TX 77445	10 Interest rate 10.25 %
		11 Maturity date 9-8-2006
12 Principal occupation / Job title (See Instructions) Chief Financial Officer		13 Employer (See Instructions) Bellville ISD
14 Description of Collateral <input checked="" type="checkbox"/> none		
15 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	16 Name of guarantor N/A 17 Guarantor address; City; State; Zip Code N/A	18 Amount Guaranteed (\$) NA
19 Principal Occupation		20 Employer
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation		Employer
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 5
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)
4 Date 8/11/06	5 Payee name US Postmaster 6 Payee address; City; State; Zip Code Hempstead TX 77445	7 Amount (\$) 78.00
8 Purpose of payment (See instructions regarding type of information required.) Postage	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 8/14/06	Payee name Bobcat Booster Club Payee address; City; State; Zip Code c/o Hempstead ISD Hempstead TX 77445	Amount (\$) 150.00
Purpose of payment (See instructions regarding type of information required.) Ad Expense - Football program	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 8/16/06	Payee name Waller County Fair Association Payee address; City; State; Zip Code 26271 Jegar Road Hockley TX 77447	Amount (\$) 75.00
Purpose of payment (See instructions regarding type of information required.) Ad expense - Fair booth	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 8/26/06	Payee name Waller Cheerleading Boosters Payee address; City; State; Zip Code P O Box 330 Waller Texas 77484	Amount (\$) 150.00
Purpose of payment (See instructions regarding type of information required.) Ad exp - Football program	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 5
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)
4 Date 9/4/06	5 Payee name Elton Mathis 6 Payee address; City; State; Zip Code 1206 13th Street Hempstead TX 77445	7 Amount (\$) 489.50
8 Purpose of payment (See instructions regarding type of information required.) Reimb for campaign brochures		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/4/06	Payee name Elton Mathis Payee address; City; State; Zip Code 1206 13th Street Hempstead TX 77445	Amount (\$) 962.55
Purpose of payment (See instructions regarding type of information required.) Reimb for Ad Expense - Fans for Fair		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/8/06	Payee name Good Signs Payee address; City; State; Zip Code 2640 25 Street Hempstead TX 77445	Amount (\$) 1,907.00
Purpose of payment (See instructions regarding type of information required.) Ad Expense - Art Work Design		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/8/06	Payee name State Bank Payee address; City; State; Zip Code P O Box 575 Hempstead TX 77445	Amount (\$) 332.23
Purpose of payment (See instructions regarding type of information required.) Watermelon Festival Sponsorship		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 5
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)
4 Date 9/9/06	5 Payee name Pattison Volunteer Fire Department 6 Payee address; City; State; Zip Code P O Box 442 Pattison TX 77466	7 Amount (\$) 115.00
8 Purpose of payment (See instructions regarding type of information required.) Reimb for Campaign Exp - Horseshoe tournament		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/9/06	Payee name Elton R. Mathis Payee address; City; State; Zip Code 1206 13th Street Hempstead TX 77445	Amount (\$) 115.04
Purpose of payment (See instructions regarding type of information required.) Reimb for exp. - Fans		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/22/06	Payee name Houston Community News Payee address; City; State; Zip Code General Delivery Pattison TX 77466	Amount (\$) 300.00
Purpose of payment (See instructions regarding type of information required.) ad exp - 'meet the candidate'		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/22/06	Payee name Waller county Fair Assn Payee address; City; State; Zip Code 26271 Jegar Rd Hockley TX 77447	Amount (\$) 200.00
Purpose of payment (See instructions regarding type of information required.) Ad exp - "100 club"		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 5
2 FILER NAME Campaign to Elect Elton Mathis District Attorney		3 ACCOUNT # (Ethics Commission filers)
4 Date 9/21/06	5 Payee name Bo Hashaw <hr/> 6 Payee address; City; State; Zip Code 44 Windmill Drive Hempstead, Texas 77445	7 Amount (\$) 100.00
8 Purpose of payment (See instructions regarding type of information required.) return campaing donation - per rule		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/22/06	Payee name Focusing Families <hr/> Payee address; City; State; Zip Code 2259 9th Street Hempstead, Texas 77445	Amount (\$) 200.00
Purpose of payment (See instructions regarding type of information required.) ad expense - golf sponsorship		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 10/4/06	Payee name Hempstead Band Booster Club <hr/> Payee address; City; State; Zip Code c/o Hempstead ISD Hempstead, Texas 77445	Amount (\$) 50.00
Purpose of payment (See instructions regarding type of information required.) ad expense - program		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 10/4/06	Payee name Waller County Peace Offers Association <hr/> Payee address; City; State; Zip Code 833 Taylor Lane Waller Texas 77484	Amount (\$) 100.00
Purpose of payment (See instructions regarding type of information required.) ad expense - police officer fund raiser		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES **SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule F: **5**

2 FILER NAME **Campaign to Elect Elton Mathis District Attorney** 3 ACCOUNT # (Ethics Commission filers)

4 Date 10/5/06	5 Payee name Elton R Mathis 6 Payee address; City; State; Zip Code 1206 13th Street Hempstead Tx 77445	7 Amount (\$) \$153.00
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8 Purpose of payment (See instructions regarding type of information required.) reimb for campaign t-shirt expense - ad	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
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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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Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
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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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Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
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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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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED