CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Texas Ethics Commission

FORM C/OH Cover Sheet pg 1

The C/OH Instruction this form.	n Guide explains how to co	omplete 1. ACCOL (Ethics Co	UNT # ommission filers)	2. Total Pages Filed:	
3. CANDIDATE /	MS / MRS / MR	FIRST	MI	OFFICE USE	ONI V
OFFICEHOLDER NAME	Mr	Jerry	R	Date Received	OINLT
	NICKNAME	LAST	SUFFIX	Date Received	
		Allen			
				-	
4. CANDIDATE / OFFICEHOLDER	Address/PO BOX; APT / SUITE #; 9426 Dartcrest	CITY; ST	TATE; ZIP CODE		
MAILING ADDRESS	o 120 Bartoroot	Dallas TX	X 75238	Date Hand-delievered	or Date Postmarked
C Change of Address					
E CANDIDATE /	AREA CODE PHOI	NE NUMBER	EXTENSION	1	
5. CANDIDATE / OFFICEHOLDER		NE NUMBER	EXTENSION		ı
PHONE	(214) 349	7518		Receipt #	Amount
6. CAMPAIGN	MS / MRS / MR	FIRST	MI	Date Processed	
TREASURER NAME	Mr	Phil	R	Date Innaged	
TW/ WILL	NICKNAME	LAST	SUFFIX	, , ,	
		Allen			
7. CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEA 9723 Maplehill	ASE); APT / SUITE #;	city; Dallas TX 7523	STATE; ZIP CODE	
ADDRESS	9723 Mapieriiii		Dallas IX 1525	0	
(Residence or business)					
8. CAMPAIGN TREASURER		NE NUMBER 1919	EXTENSION		
PHONE	(214) 348	1919			
9. REPORT TYPE	8th Day Before Main Election	on			
10 DEDIOD					
10. PERIOD COVERED	4/1/200	9 THROUGH	4/29/2009		
11. ELECTION	ELECTION DATE	ELECTION TYPE			
	5/9/2009	General			
12. OFFICE	OFFICE HELD (if any)		13. OFFICE SOUGHT (if knd	own)	
	Dallas City Council District	10	Council District 10		
14 NOTICE	** Direct campaign expenditures are	e campaign expenditures	made by others without the candid	ate's prior consent or ap	proval
14. NOTICE OF DIRECT	Candidates are required to disclose	this information only if the	ey receive notification of the direct	campaign expenditure. *	*
CAMPAIGN EXPENDITURE	NAME				
BY OTHER INDIVIDUALS					
	ADDRESS / PO BOX; APT .	/ SUITE #; CITY;	STATE; ZIP CODE		
	APT	SOME π_i CIII;	SIAIL, ZIF CODE		
C additional pages					
		GO	TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mr Jerry R Allen			16 ACCOUNT #(Ethics Commission filers)	
17 NOTICE FROM POLITICAL COMMITTEE(S)	** This box is for notice of polit the candidate/officeholder. <i>The</i> consent. Candidates and officeh expenditures. **	tical contributions accepted or political expenditures is expenditures may have been made without the co- nolders are required to report this information only if	made by political committees to support andidate's or officeholder's knowledge or they receive notice of such	
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
C additional pages	c GENERAL	COMMITTEE ADDRESS		
	c SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
18 CONTRIBUTION TOTALS		BUTIONS OF \$50 OR LESS (OTHER THAN RANTEES OF LOANS), UNLESS ITEMIZED	\$ 0	
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 22115.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED 4. TOTAL POLITICAL EXPENDITURES		\$ 0	
			\$ 34227.29	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 3932.43	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPORTI	OF ALL OUTSTANDING LOANS AS OF THE	\$ 0	
19 AFFIDAVIT		I swear, or affirm, under penalty of perjuristrue and correct and includes all information me under Title 15, Election code.		
		***ELECTRONICALLY CER Signature of Candidate or O		
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said Mr Jerry R Allen, this the 1st day				
ofMay, 20_09, to certify which, witness my hand and seal of office.				
Signature of officer adr	ninistering oath Pri	nted name of officer administering oath	Title of officer administering oath	

The Instruction	Guide explains how to complete this form		1 Total pages Schedule A:		
				1 of 18	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
M I DAII					
Mr Jerry R Allen					
4 Date	5 Full name of contributor c out-of-state PAC (ID#:		7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)	
04/01/2009	David Burkhaner		50.00		
0 1/01/2009	6 Contributor address; City; State; Zip C	ode			
	9722 Bellewood Dallas, TX 75238				
			(If travel outside of Texa	s, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/03/2009	Bruce Prine		100.00		
04/03/2009	Contributor address; City; State; Zip C		100.00		
	9614 Moss Haven Dallas, TX 75231				
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#:) Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/03/2009	2 mins 2 0.100 0.1100 0.1100		500.00		
	Contributor address; City; State; Zip C	ode			
	1412 Griffin Street Dallas, TX 75215		(If travel outside of Texa	s. complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	-, -	
Date	Full name of contributor C out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/02/2000	Robert Yielding			description (if applicable)	
04/03/2009	Contributor address; City; State; Zip C	ode	100.00		
	10424 Trailcliff Dallas, TX 75238				
Dringinal accum	ation / Job title (See Instructions)	Employer	(If travel outside of Texa (See Instructions)	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer	(See mstructions)		
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	James Jones		Contribution (\$)	description (if applicable)	
04/07/2009	Operation to a state of the Charles 71's O		50.00		
	Contributor address; City; State; Zip C 10360 White Rock Circle Dallas, TX 75238	oae			
	Todoo Willie Rock Circle Bullas, 111 73230		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
	ATTACH ADDITIONAL COPIES O	OF THIS FORM	M AS NEEDED		
If contribut	tor is out-of-state PAC, please see instru	ction guide fo	or additional repo	rting requirements.	

SCHEDULE A

The Instruction	Guide explains how to complete this form		1 Total pages Schedule A:	
			2 of 1	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
M I DAII				
Mr Jerry R Allen				
4 Date	5 Full name of contributor C out-of-state PAC (ID#: Ann Piper		7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)
04/07/2009			250.00	
0 1/0 // 2009	6 Contributor address; City; State; Zip C			
	5952 Royal Lane Suite 205 Dallas, TX 75230			
	<u> </u>		(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#: Tim Morgan		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/07/2009	Tilli Morgan		100.00	
04/07/2009	Contributor address; City; State; Zip C	ode	100.00	
	9330 Raeford Dallas, TX 75243			
Dulan alan al anno an	Allow (John Wills (Cons. In Abrocations)	For all and a	(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	
Data	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Mary McDermott Cook		Contribution (\$)	description (if applicable)
04/07/2009			250.00	
	Contributor address; City; State; Zip Contributor address; Dallas, TX 75229	ode		
	10040 Strait Dallas, 1X 13229		(If travel outside of Texa	l s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
			•	
Date	Full name of contributor c out-of-state PAC (ID#: J. McDonald Williams		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/07/2009			500.00	
	Contributor address; City; State; Zip C	ode		
	4715 Wildwood Dallas, TX 75209		(If travel outside of Texa	s. complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	-, -
			•	
Doto	Full name of contributor C out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Kristi Sherrill		Contribution (\$)	description (if applicable)
04/07/2009	Contributor address; City; State; Zip C	ode	50.00	
	4352 Potomac Avenue Dallas, TX 75205			
5	<u></u>		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
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lf contribut	ATTACH ADDITIONAL COPIES C tor is out-of-state PAC, please see instruc			rtina requirements
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Texas Ethics Commission

SCHEDULE A

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			3 of 1	8	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
Mr Jerry R Allen					
1711 0011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
4 Date	5 Full name of contributor c out-of-state PAC (ID#:	,	7 Amount of	8 In-kind contribution	
4 Date	B.D. Hartsell		Contribution (\$)	description (if applicable)	
04/07/2009			100.00		
	6 Contributor address; City; State; Zip C 10006 Mil Trail Dallas, TX 75238	ode			
	ŕ		(If travel outside of Texa	s, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)		
				-	
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
	Michael Kovarsky		. ,	description (ii applicable)	
04/07/2009	Contributor address; City; State; Zip C		50.00		
	9422 Arborhill Dallas, TX 75243	oue			
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Data	Full name of contributor C out-of-state PAC (ID#:	,	Amount of	In-kind contribution	
Date	Bruce Bowles		Contribution (\$)	description (if applicable)	
04/07/2009			100.00		
	Contributor address; City; State; Zip C 9634 Trailview Dallas, TX 75238	ode			
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	Ryan Bowles		Contribution (\$)	description (if applicable)	
04/07/2009	Contributor address; City; State; Zip C	 ode	50.00		
	9823 Edgecove Dallas, TX 75238				
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	Bill Goad		Contribution (\$)	description (if applicable)	
04/07/2009	Contributor address; City; State; Zip C	ode	100.00		
	9506 Covemeadow Dallas, TX 75238	oue			
5		- I	(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
	ATTACH ADDITIONAL COPIES O	OF THIS FORM	M AS NEEDED		
If contribut	tor is out-of-state PAC, please see instru			rting requirements.	

Texas Ethics Commission

The Instruction	Guide explains how to complete this form		1 Total pages Scheo 4 of 1	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Z FILEK IVAIVIL			3 ACCOUNT # (2000)	5 CUITIITIISSIUIT TIICI 3)
Mr Jerry R Allen				
4 Date	5 Full name of contributor c out-of-state PAC (ID#: Brooks Purnell)	7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)
04/07/2009			500.00	<u> </u>
!	6 Contributor address; City; State; Zip C 7114 Claybrook Dallas, TX 75231	ode	 	
!	7114 Claybrook Dunus, 112 75251		(If travel outside of Texa	as. complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	s, complete consucer :,
7	,	10 2		
Date	Full name of contributor C out-of-state PAC (ID#:Ashley Blomberg		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/07/2009		!	100.00	
!	Contributor address; City; State; Zip C 9111 Shoreview Dallas, TX 75238	ode]	
!	9111 Shoreview Dallas, TX 75238		(If travel outside of Texa	as complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	is, complete outloads .,
	,	1 3	,	
Date	Full name of contributor C out-of-state PAC (ID#: John Treadgill) Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/07/2009			100.00	i I
!	Contributor address; City; State; Zip C 9104 Kingsley Creek Dallas, TX 75231	ode		l I
!	9104 Kliigsiey Cleek Danas, 17, 75251		(If travel outside of Texa	ls, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#:)) Amount of	In-kind contribution
	Kim Galindo	!	Contribution (\$)	description (if applicable)
04/07/2009	Contributor address; City; State; Zip C	Code	50.00	
!	9907 Spirehaven Dallas, TX 75238	!		
		- I ((If travel outside of Texa	is, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	Full name of contributor c out-of-state PAC (ID#:)	Amount of	In-kind contribution
Date	Robert S Douglas	!	Contribution (\$)	description (if applicable)
04/07/2009	Contributor address; City; State; Zip C	`ode	250.00	l
!	9312 Moss Haven Dallas, TX 75231	ode		1
	1		(If travel outside of Texa	is, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	ATTACH ADDITIONAL CODIES		A AC NICEDED	
If contribu	ATTACH ADDITIONAL COPIES (tor is out-of-state PAC, please see instru			rtina requirements.

SCHEDULE A

The Instruction	Guide explains how to complete this form		1 Total pages Schedule A:	
			5 of 18	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
2				·
Mr Jerry R Allen				
4 Date	5 Full name of contributor c out-of-state PAC (ID#:		7 Amount of	8 In-kind contribution
	R.A. Price		Contribution (\$)	description (if applicable)
04/07/2009			50.00	
	6 Contributor address; City; State; Zip C 10136 Mapleridge Dallas, TX 75238	ode		
			(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
,	then, see the (eee men genere)	. o zp.oye. ((ess men denome)	
5 .	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Carol Baker		Contribution (\$)	description (if applicable)
04/13/2009			250.00	
	Contributor address; City; State; Zip C	ode		
	9928 Spirehaven Dallas, TX 75238		(If travel outside of Texa	c complete Schodule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	s, complete scriedale 1)
Timelpar occupe	mon / 305 title (See man detions)	Linployeer	(See man denons)	
Date	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	Chris Wells		Contribution (\$)	description (if applicable)
04/13/2009			500.00	
	Contributor address; City; State; Zip C 8727 Vista View Dallas, TX 75243	ode		
	8/2/ Vista View Dalias, 1X /3243		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#:	;	Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/12/2000	Sherryl Wesson			ассолрион (н аррисаело)
04/13/2009	Contributor address; City; State; Zip C	ode	100.00	
	9223 Raeford Dallas, TX 75243			
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In kind contribution
Date	Joel Allison		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/13/2009			100.00	
	Contributor address; City; State; Zip C	ode		
	9210 Westwind Court Dallas, TX 75231		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
, ,,,,,	, ,	, , ,		
	ATTACH ADDITIONAL COPIES O	OF THIS FORM	M AS NEEDED	
If contribut	tor is out-of-state PAC, please see instru			rting requirements.

The Instruction	Guide explains how to complete this form		1 Total pages Sched	fule A
			6 of 1	
			0 01 1	.0
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Ma Ionari D. Allon				
Mr Jerry R Allen				
4 Date	5 Full name of contributor C out-of-state PAC (ID#:		7 Amount of	8 In-kind contribution
	James Stone		Contribution (\$)	description (if applicable)
04/13/2009			25.00	
	6 Contributor address; City; State; Zip C	ode		
	9910 Parkford Dallas, TX 75238			
			(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
	Full name of contributor c out-of-state PAC (ID#:) Amount of	In-kind contribution
Date	David Lind		Contribution (\$)	description (if applicable)
04/13/2009			100.00	
04/13/2007	Contributor address; City; State; Zip C		100.00	
	6231 Stefani Dallas, TX 75225	Jue		
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	
Data	Full name of contributor c out-of-state PAC (ID#:) Amount of	In-kind contribution
Date	Mike Meripolski		Contribution (\$)	description (if applicable)
04/13/2009	Trans Transposini		50.00	
04/13/2009	Contributor address; City; State; Zip C	ode	30.00	
	9746 Bellewood Dallas, TX 75238			
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor c out-of-state PAC (ID#:) Amount of Contribution (\$)	In-kind contribution description (if applicable)
	John Dean		Contribution (\$)	description (if applicable)
04/13/2009	Contributor address; City; State; Zip C		100.00	
	Contributor address; City; State; Zip Contributor address; Dallas, TX 75231	Jue		
	7317 Hundrey Danas, 1X 73231		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer /	(See Instructions)	· ·
		,	(,	
	Full name of contributor c out-of-state PAC (ID#:) Amount of	In-kind contribution
Date	M.E. Clary		Amount of Contribution (\$)	description (if applicable)
04/13/2009	1.1.2. 0.1		100.00	
04/13/2007	Contributor address; City; State; Zip C	ode	100.00	
	9033 Guildhall Dallas, TX 75238			
	<u> </u>		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	ATTACH ADDITIONAL COPIES O	F THIS FORM	M AS NEEDED	
If contribu	tor is out-of-state PAC, please see instruc			rting requirements.
55				

The Instruction	Guide explains how to complete this form		1 Total pages Sched	dule A:
		l	7 of 18	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Mr Jerry R Allen				
4 Date	5 Full name of contributor C out-of-state PAC (ID#:_)	7 Amount of	8 In-kind contribution
!	Greg Duval	l	Contribution (\$)	description (if applicable)
04/13/2009			250.00	
!	6 Contributor address; City; State; Zip C 9218 Loma Vista Dallas, TX 75243		 	
!	7210 Lonia vista		(If travel outside of Texa	es complete Schedule T)
C. Dringing occupy	ction / Joh title (Coe Instructions)	10 Employer (<u> </u>	s, complete ou leadie 17
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
	out of state DAC (ID#)			
Date	Full name of contributor c out-of-state PAC (ID#:	/	Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/12/2000	Jackie Bewiey		1000.00	
04/13/2009	Contributor address; City; State; Zip C	`	1000.00	İ
1	P.O. Box 36288 Dallas, TX 75235	,oue		
			(If travel outside of Texa	is, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#:)	Amount of	In-kind contribution
!	Rosemarie Bewley		Contribution (\$)	description (if applicable)
04/13/2009	Contaile standardon City, State, 7in (>d -	1000.00	i
!	Contributor address; City; State; Zip C P.O. Box 36288 Dallas, TX 75235		l ;	.
1	1.0. Bux 30200 Danas, 111 75255		(If travel outside of Texa	I is, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#:)	Amount of Contribution (\$)	In-kind contribution description (if applicable)
	Gayle McCrory			description (ii applicable)
04/13/2009	Contributor address; City; State; Zip C	Code	100.00	
!	10905 Cactus Dallas, TX 75238			ĺ
			(If travel outside of Texa	ıs, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor C out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Richard Phelps		Contribution (\$)	description (if applicable)
04/13/2009	Contributor address; City; State; Zip C	`nde	100.00	ĺ
!	9638 Hill View Dallas, TX 75231	Jode		
	,		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	ATTACH ADDITIONAL COPIES (OF THIS FORM	M AS NEEDED	
If contribut	tor is out-of-state PAC, please see instru	iction quido fo	or additional ropo	rtina roquiromonts

The Instruction	Guide explains how to complete this form		1 Total pages Sched	1 Total pages Schedule A:	
		l	8 of 1	8	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
Mr Jerry R Allen		l			
-		l			
4 Date	5 Full name of contributor c out-of-state PAC (ID#:		7 Amount of	8 In-kind contribution	
!	Nancy Sales	l	Contribution (\$)	description (if applicable)	
04/13/2009	6 Contributor address; City; State; Zip C	Codo	20.00		
!	9625 Lanshire Dallas, TX 75238		ļ		
			(If travel outside of Texa	I is, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#:)	Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/13/2009	Nick Sasso	l	50.00		
04/13/2009	Contributor address; City; State; Zip C		30.00		
!	9085 Longmont Dallas, TX 75238		ļ	l	
5 tested occup		Franksypor	(If travel outside of Texa	is, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	Thomas Lueder		Contribution (\$)	description (if applicable)	
04/13/2009			100.00	l I	
!	Contributor address; City; State; Zip C 9158 Drumcliffe Dallas, TX 75231		l ;	 	
	Janus, 11 . 222	<u>-</u>	(If travel outside of Texa	ıs, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	ROBERT TRIMBLE		Contribution (\$)	description (if applicable)	
04/13/2009	Contributor address; City; State; Zip C	înde	100.00		
!	8333 DOUGLAS Suite 1350	Jode	Ī	İ	
	DALLAS, TX 752		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	Robert Breunig	!	Contribution (\$)	description (if applicable)	
04/13/2009	Contributor address; City; State; Zip C	?ode	250.00	İ	
!	9215 Westview Circle Dallas, TX 75231		ļ	ĺ	
			(If travel outside of Texa	is, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
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SCHEDULE A

The Instruction	Guide explains how to complete this form		1 Total pages Sched 9 of 1	
2 FILER NAME Mr Jerry R Allen			3 ACCOUNT # (Ethics	Commission filers)
4 Date 04/13/2009	5 Full name of contributor c out-of-state PAC (ID#:Peter Manos 6 Contributor address; City; State; Zip C 9900 North Central Suite 235 Dallas, TX 75231	Code	7 Amount of Contribution (\$) 100.00 (If travel outside of Texas	8 In-kind contribution description (if applicable) s, complete Schedule T)
9 РППСТРАТ ОССИРА	ation / Job title (See Instructions)	TO Employer ((See Instructions)	
Date 04/13/2009	Full name of contributor C out-of-state PAC (ID#: Ward Beaudry Contributor address; City; State; Zip C 9809 Church Circle Dallas, TX 75238	Code	Amount of Contribution (\$) 100.00 (If travel outside of Texas	In-kind contribution description (if applicable)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	, , ,
Date 04/13/2009	Full name of contributor C out-of-state PAC (ID#:Rick Hawkins Contributor address; City; State; Zip C 13601 Preston Suite 460 E Dallas, TX 75240		Amount of Contribution (\$) 200.00 (If travel outside of Texas	In-kind contribution description (if applicable) s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions)	
Date 04/13/2009	Full name of contributor C out-of-state PAC (ID#:	Code	Amount of Contribution (\$) 100.00 (If travel outside of Texas	In-kind contribution description (if applicable)
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions)	s, complete senedule 1)
Date 04/13/2009	Full name of contributor c out-of-state PAC (ID#:	Code	Amount of Contribution (\$) 100.00 (If travel outside of Texas	In-kind contribution description (if applicable)
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Mr Jerry R Allen		!		
		!		
4 Date	5 Full name of contributor c out-of-state PAC (ID#:		7 Amount of	8 In-kind contribution
	Monica Nagle		Contribution (\$)	description (if applicable)
04/13/2009	l		250.00	
	6 Contributor address; City; State; Zip C	ode	!	
	9408 Dartcrest Dallas, TX 75238	!	<u> </u>	
			(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
			-	
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution
	DR. Charles Ku	I	Contribution (*)	description (if applicable)
04/13/2009			250.00	
	Contributor address; City; State; Zip C 148 Red Oak Lane Flower Mound, TX			
	140 Red Oak Lane 1 Tower Fround, 117	13020	(If travel outside of Texa	s complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	o, complete constant .,
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Data	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Jana Boswell		Contribution (\$)	description (if applicable)
04/13/2009			250.00	
0 1/12/2005	Contributor address; City; State; Zip C	ode	250.00	
	9406 Winding Ridge Dallas, TX 75238	I		l
Deigoinal accura	-tion / Joh title (Con Instructions)	Employer ((If travel outside of Texa	s, complete Schedule 1)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Data	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	David Taylor		Contribution (\$)	description (if applicable)
04/13/2009			150.00	
	Contributor address; City; State; Zip C	ode		
	9432 Dartcrest Dallas, TX 75238	!	(If travel outside of Texa	s complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	o, complete consucer .,
	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	Kathy Adams		Contribution (\$)	description (if applicable)
04/14/2009			250.00	Í
	Contributor address; City; State; Zip C	ode	l ;	
	9927 Capridge Dallas, TX 75238	!	(If travel outside of Texa	l s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	·
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SCHEDULE A

The Instruction Guide explains how to complete this form			1 Total pages Schedule A:		
		11 of 18			
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
Mr Jerry R Allen					
4 Date	5 Full name of contributor c out-of-state PAC (ID#:	;	7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)	
04/20/2009	Rosemarie Ewton		100.00		
04/20/2009	6 Contributor address; City; State; Zip C	ode	100.00		
	9550 Windy Knoll Dallas, TX 75243			l	
O Principal accura	tion / lob title (See Instructions)	10 Employer ((If travel outside of Texa (See Instructions)	is, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	TO Employer ((See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#:	,	Amount of	In-kind contribution	
	Marcel Quimby		Contribution (\$)	description (if applicable)	
04/20/2009	Contributor address; City; State; Zip C		100.00		
	9641 Spring Branch Dallas, TX 75238	oue			
			<u> </u>	(If travel outside of Texas, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
	Brian Littleton		Contribution (\$)	description (if applicable)	
04/20/2009	Contributor address; City; State; Zip C	ode	50.00		
	10024 Larchbrook Circle Dallas, TX 75238				
Principal occupa	Principal occupation / Job title (See Instructions) Employer ((If travel outside of Texa (See Instructions)	s, complete Schedule T)	
гинстрат оссира	nion / Job title (See mstructions)	Litiployer ((See mstructions)		
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009	Katherine Stewart		250.00		
0 11 201 2005	Contributor address; City; State; Zip C	ode			
	7935 Square Dallas, TX 75238		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#: Robert Morris		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009			500.00		
	Contributor address; City; State; Zip C 9626 Hilldale Dallas, TX 75231	ode			
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer ((See Instructions)		
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SCHEDULE A

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			12 01	16
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Ma Ionari D. Allon				
Mr Jerry R Allen				
_				
4 Date	5 Full name of contributor c out-of-state PAC (ID#: Linebarger Goggan Blair & Sampson, LLP)	7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)
04/20/2009	Zaneounger Goggun Zami et Sampson, ZZi		1000.00	
	6 Contributor address; City; State; Zip C	ode		
	P.O. Box 17428 Austin, TX 78760			l <u>-</u>
			(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
	F. II			
Date	Full name of contributor C out-of-state PAC (ID#: Neal Sleeper)	Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/20/2009	real Steeper		100.00	
	Contributor address; City; State; Zip C	ode		
	3324 Blackburn Street Dallas, TX 75204			
Dringinal accum	ation / Job title (See Instructions)	Employeer	(If travel outside of Texa (See Instructions)	s, complete Schedule T)
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Date	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	Margaret Gall		Contribution (\$)	description (if applicable)
04/20/2009			150.00	
	Contributor address; City; State; Zip C 9247 Moss Haven Dallas, TX 75231	oae		
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Date	Full name of contributor c out-of-state PAC (ID#:)	Amount of	In-kind contribution
	Ebby Halliday Acers		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address; City; State; Zip C	ode	200.00	
	P.O. Box 12348 Dallas, TX 75225			
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Data	Full name of contributor C out-of-state PAC (ID#:)	Amount of	In-kind contribution
Date	Donald McNamara		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address; City; State; Zip C	ode	100.00	
	3232 McLinney Ave. Suite 890			
	Dallas, TX 75204		(If travel outside of Texa	s, complete Schedule T)
Principal occupation / Job title (See Instructions) Employ		Employer ((See Instructions)	
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Texas Ethics Commission

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		13 of 18		
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Mr Jerry R Allen				
1711 0011				
4 Date	5 Full name of contributor c out-of-state PAC (ID#:	,	7 Amount of	8 In-kind contribution
4 Date	Thad Baker		Contribution (\$)	description (if applicable)
04/20/2009			1000.00	
	6 Contributor address; City; State; Zip C 4011 Commerce Dallas, TX 75226	ode		
	,		(If travel outside of Texa	s, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
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Date	Full name of contributor c out-of-state PAC (ID#:)	Amount of Contribution (\$)	In-kind contribution description (if applicable)
	Robert Chereck		. ,	description (ii applicable)
04/20/2009	Contributor address; City; State; Zip C		250.00	
	8726 Arbor Park Ct. Dallas, TX 75243	Jue		
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)	
Data	Full resume of a subtilibution a out of state DAC (ID#)		Amount of	In-kind contribution
Date	Full name of contributor C out-of-state PAC (ID#: Home Builders Association of Greater Dallas PAC	/	Contribution (\$)	description (if applicable)
04/20/2009			250.00	
	Contributor address; City; State; Zip Contributor address; Plano, TX 75093	ode		
	- Immo, III /30/3		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Doto	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	James Frye		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address; City; State; Zip C	ode	100.00	
	8956 Aldwick Dallas, TX 75238	540		
			(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Halff Associates State PAC		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address; City; State; Zip C	ode	500.00	
	1201 North Bowser Rd Richardson, TX 75			
			(If travel outside of Texa	s, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer ((See Instructions)	
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		14 of 18		
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)
Mr Jerry R Allen				
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4 5 1	Le Ellis Control of the Page (ID)		7.0	
4 Date	5 Full name of contributor c out-of-state PAC (ID#:		7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)
04/20/2009	,		1500.00	
	6 Contributor address; City; State; Zip C	Code		
	8201 Stemmons Freeway Dallas, TX 75247		46.	1. 0.1 1.1 7
O Delegale al accessor	tion (lab title (Con Instructions)	10 Franks	(If travel outside of Texa	is, complete Schedule T)
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	
	Full name of contributor c out-of-state PAC (ID#:		Amount of	In kind contribution
Date	Apartment Association of Greater Dallas-PAC		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/20/2009	Topic union Tipocounted of Crowner 2 union Title		1000.00	
	Contributor address; City; State; Zip C	Code		
	4230 LBJ Freeway Suite 140 Dallas, TX 75244		46	
Principal occupa	ation / Job title (See Instructions)	Employeer	(If travel outside of Texa (See Instructions)	s, complete Schedule 1)
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Date	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution
54.0	Faye Peevey		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address. City State. 7in C	`	50.00	
	Contributor address; City; State; Zip C 9049 Stone Creek Place Dallas, TX 75243	Lode		
	Julius, 17 752-15		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
Doto	Full name of contributor c out-of-state PAC (ID#:	,	Amount of	In-kind contribution
Date	Miranda Lind		Contribution (\$)	description (if applicable)
04/20/2009	Contributor address; City; State; Zip C	``odo	100.00	
	6231 Stefani Dallas, TX 75225	oue		
	,		(If travel outside of Texa	s, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	
	E. H			
Date	Full name of contributor c out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)
04/20/2009			500.00	
Contributor address; City; State; Zip Code				
	5430 LBJ Suite 1200 Dallas, TX 75240		(If travel outside of Texa	s, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer		(See Instructions)		
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Texas Ethics Commission

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2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
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Mr Jerry R Allen					
4 Data	Fig. 11 manner of contails store a cut of stote DAC (ID#)		7 Amazumt of		
4 Date	5 Full name of contributor c out-of-state PAC (ID#: Joe Alcantar		7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)	
04/20/2009			500.00		
	6 Contributor address; City; State; Zip C 6222 Vanderbilt Avenue Dallas, TX 75214	ode			
	0222 Valideront Avenue Danas, 17/3214		(If travel outside of Texa	s complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	(If travel outside of Texas, complete Schedule T)	
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Date	Full name of contributor c out-of-state PAC (ID#:		Amount of	In-kind contribution	
Date	Greg Duval		Contribution (\$)	description (if applicable)	
04/20/2009			250.00		
	Contributor address; City; State; Zip C 9217 Loma Visa Dallas, TX 75243	ode			
			(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
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Date	Full name of contributor c out-of-state PAC (ID#:	;) Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009	Treatier Haisteau		250.00		
	Contributor address; City; State; Zip C	ode			
	9508 Fieldcrest Dallas, TX 75238		(If travel outside of Texa	ls, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	·	
Date	Full name of contributor c out-of-state PAC (ID#: Stephanie Colovas	;) Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009			500.00		
	Contributor address; City; State; Zip C	Code			
	3831 Turtle Creek Blvd. Suite 12E2 Dallas, TX 75219		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)	,	
Date	Full name of contributor C out-of-state PAC (ID#:		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
	Stan Scates		, ,	description (if applicable)	
04/20/2009 250.00 Contributor address; City; State; Zip Code					
	12119 Larchgate Dallas, TX 75243		(If travel outside of Texa	s, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer		(See Instructions)	, ,		
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SCHEDULE A

The Instruction Guide explains how to complete this form		1 Total pages Schedule A: 16 of 18			
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
Mr Jerry R Allen					
4 Date	5 Full name of contributor c out-of-state PAC (ID#:) Gary Dennis		7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)	
04/20/2009	6 Contributor address; City; State; Zip C 4912 Chickadee Balch Springs, TX		200.00		
!		. 73100	(If travel outside of Texa	s, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer (See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#: Freese and Nichols PAC)	Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009			100.00		
	Contributor address; City; State; Zip C 4055 International Plaza Suite 200		l i		
	Fort Worth, TX 76		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#:)	Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/21/2009	Contributor address; City; State; Zip C 9111 Kingsley Creek Dallas, TX 75231	Code	100.00		
	Circle		(If travel outside of Texa	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#: Margaret Adams		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/21/2009	Contributor address; City; State; Zip C 10005 Parkford Dallas, TX 75238	Code	50.00		
!	10005 Parkiord Danas, 1A 13236		(If travel outside of Texa	l s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#: Patrick Crow		Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009			250.00		
	Contributor address; City; State; Zip C 4818 North Lindhurst Ave. Dallas, TX 75229	Code	(If travel outside of Texa	is, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer ((See Instructions)		
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		l	17 of	18	
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)	
Mr Jerry R Allen					
4 Date	5 Full name of contributor c out-of-state PAC (ID#: Jane McCurdy)	7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)	
04/21/2009	Jane McCurdy		20.00		
	6 Contributor address; City; State; Zip C 9339 Faircrest Dallas, TX 75238	ode	!		
	75571 4115155	l	(If travel outside of Texa	ls, complete Schedule T)	
9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)	See Instructions)	
Date	Full name of contributor c out-of-state PAC (ID#: HNTB Holdings PAC	Χ	Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/20/2009			1000.00		
	Contributor address; City; State; Zip C 715 Kirk Drive Kansas City, MO 6			!]	
			(If travel outside of Texa	ıs, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#: Ken Goldberg)) Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/21/2009	Contributor address; City; State; Zip C	`ode	250.00	 	
	16208 Ranchita Dallas, TX 75248	oue	Ī	į	
			(If travel outside of Texas	s, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor c out-of-state PAC (ID#: Hispanic PAC of Dallas)) Amount of Contribution (\$)	In-kind contribution description (if applicable)	
04/23/2009			250.00		
!	Contributor address; City; State; Zip C	ode	ļ	l I	
!	P.O. Box 141228 Dallas, TX 75214	I	(If travel outside of Texa	l us, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions)	Employer ((See Instructions)		
Date	Full name of contributor C out-of-state PAC (ID#:) Amount of	In-kind contribution	
04/23/2009	Texas Instruments PAC	l	Contribution (\$) 500.00	description (if applicable)	
04/25/2009	Contributor address; City; State; Zip C	code	300.00		
	P.O. Box 742746 Dallas, TX 75374	l	(If travel outside of Texa	us, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer ((See Instructions)		
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P.O.Box 12070

Texas Ethics Commission

SCHEDULE A

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The Instruction Guide explains how to complete this form			1 Total pages Schedule A:			
		18 of 18				
2 FILER NAME			3 ACCOUNT # (Ethics	s Commission filers)		
Mr Jerry R Allen						
4 D-4-	F. Full as an experience of a sustable state of etate DAC (ID#).		7	O to take a contail out on		
4 Date	5 Full name of contributor c out-of-state PAC (ID#:_ Bradley Mitchell	/	7 Amount of Contribution (\$)	8 In-kind contribution description (if applicable)		
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04/23/2009			100.00			
	6 Contributor address; City; State; Zip C 9002 Woodbluff Ct. Dallas, TX 75243	oae				
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9 Principal occupa	ation / Job title (See Instructions)	10 Employer ((See Instructions)			
D .	Full name of contributor c out-of-state PAC (ID#:)	Amount of	In-kind contribution		
Date	Dykema Gossett PLLC		Contribution (\$)	description (if applicable)		
04/24/2009			300.00			
04/24/2007	Contributor address; City; State; Zip C	`ada	300.00			
	Contributor address; City; State; Zip C 1717 Main Street Suite 2400	oue				
	Dallas, TX 75201		(If travel outside of Texa	is, complete Schedule T)		
Principal occupa	ation / Job title (See Instructions)	Employeer	(See Instructions)			
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	Contributor address; City; State; Zip Code					
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			(If travel outside of Texa	is, complete Schedule T)		
Principal occupation / Job title (See Instructions) Employer ((See Instructions)				
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	ATTAOLI ADDITIONAL OCCUSO	OF THIS 505:	4 AC NEEDED			
	ATTACH ADDITIONAL COPIES (
If contribut	If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					

9322 Moss Trail Dallas, TX 75231 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 Various Campaign Material

Date Payee name **Amount** (\$) Graphics Management 04/29/2009 16237.50 City; State; Zip Code Payee address; 9322 Moss Trail Dallas, TX 75231

** Complete if direct expenditure to benefit C/OH ** Purpose of payment (See instructions regarding type of information required.)

City; State; Zip Code

Candidate / Officeholder name Office sought Office held Consulting fees and various campaign material

(If travel outside of Texas, complete Schedule T)

6 Payee address;

(If travel outside of Texas, complete Schedule T)

04/07/2009

Payee name **Amount** Date (\$) Lake Highlands Junior Womens League 04/13/2009 250.00 City; State; Zip Code Payee address; Dallas, TX 75238 P.O. Box 38225

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

(If travel outside of Texas, complete Schedule T)

Date Payee name **Amount** (\$) United States Postal Service 04/11/2009 Payee address; City; State; Zip Code 42.00 10502 Markison Dallas, TX 75238

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

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(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Office held

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 SCHEDULE F POLITICAL EXPENDITURES The Instruction Guide explains how to complete this form 1 Total pages Schedule F: 2 of 2 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Mr Jerry R Allen Date 5 Payee name 7 Amount (\$) Painter Communications 04/17/2009 2440.64 City; State; Zip Code 6 Payee address; 309 Washington Suite #2111 Conshohocken, CO 19428 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 Live Operator Calls (If travel outside of Texas, complete Schedule T) Amount Date Payee name (\$) City of Dallas Northeast Patrol Division 04/27/2009 100.00 City; State; Zip Code Payee address; Dallas, TX 75238 9915 East Northwest Highway Purpose of payment (See instructions regarding type of ** Complete if direct expenditure to benefit C/OH ** information required.) Candidate / Officeholder name Office sought Office held Donation to Kids Fair (If travel outside of Texas, complete Schedule T) Payee name **Amount** Date (\$) Payee address; City; State; Zip Code ** Complete if direct expenditure to benefit C/OH ** Purpose of payment (See instructions regarding type of information required.) Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T) Date **Amount** Payee name (\$)

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

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED