CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers): 00000001

2 Total pages filed: 16

OFFICE USE ONLY
Date Received
Date Hand-delivered or Date Postmarked
Receipt # | Amount
Date Processed
Date Imaged

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3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: | FIRST: CHRISTOPHER | MI: "CHIP"
NICKNAME: | LAST: HAASS | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address
ADDRESS / PO BOX: 8715 STARCREST DRIVE #46
APT / SUITE #: | CITY: SAN ANTONIO, | STATE: TEXAS | ZIP CODE: 78217

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: ( ) | PHONE NUMBER: | EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MRS. | FIRST: KARIN | MI:
NICKNAME: | LAST: STANLEY | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE): PMB # 242, 1533 AUSTIN HIGHWAY, SUITE 102
APT / SUITE #: | CITY: SAN ANTONIO, | STATE: TEXAS | ZIP CODE: 78218

8 CAMPAIGN TREASURER PHONE
AREA CODE: ( ) | PHONE NUMBER: | EXTENSION:

9 REPORT TYPE
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FF)

10 PERIOD COVERED
Month Day Year: 1 / 1 / 05 THROUGH Month Day Year: 3 / 28 / 05

11 ELECTION
ELECTION DATE Month Day Year: / /
ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any): OTHER - CITY COUNCIL 10

13 OFFICE SOUGHT (if known):

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••
Name
Address / PO Box: Apt. / Suite #: City: State: Zip Code
☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: CHRISTOPHER "CHIP" HAASS

16 ACCOUNT # (Ethics Commission filers): 00000001

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

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18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 8,600.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4.	TOTAL POLITICAL EXPENDITURES	$ 22,386.79
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 16,070.52
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2,000.00

19 AFFIDAVIT

MELINDA S. LOPEZ NOTARY PUBLIC STATE OF TEXAS EXPIRES 04-04-2009

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Christopher K. Haass
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Christopher K. Haass, this the 7th day of April, 20 05, to certify which, witness my hand and seal of office.

Melinda S. Lopez	Melinda S. Lopez	Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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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: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1/20/05	JEREMY D. MEARS 24842 TWIN ARROWS SAN ANTONIO, TEXAS 78258	500.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/20/05	CAROL L. MYERS 12914 EL CHARRO SAN ANTONIO, TEXAS 78233	200.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/26/05	WM. KENNON VICKREY 12940 COUNTRY PARKWAY SAN ANTONIO, TEXAS 78216	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/3/05	BRENDA VICKREY JOHNSON 13055 N. HUNTERS CIRCLE SAN ANTONIO, TEXAS 78230	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/11/05	HERBERT STIER 7511 BRIDGEWATER DRIVE SAN ANTONIO, TEXAS 78209	100.00	

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

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1 Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/16/05	DAVID H. PLYLAR 4216 MISTY GLADE SAN ANTONIO, TEXAS 78247	50.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/17/05	STEPHEN HORVATH 10838 PARRIGIN ROAD HELOTES, TEXAS 78023	250.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/26/05	SABRINA I. HAMMELL 5802 SPRING PEBBLE SAN ANTONIO, TEXAS 78247	50.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/05	JOSEPH PAGLIARA 5942 LITTLE BRANDYWINE SAN ANTONIO, TEXAS 78233	250.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/05	CLIFF MORTON OAKWELL FARMS PARKWAY SAN ANTONIO, TEXAS 78216	500.00	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/6/05	JAN H. VAN DEN HENDE 3951 KNOLLCROSS SAN ANTONIO, TEXAS 78247	100.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/6/05	ESTHER CURNUTT 126 FIVE OAKS SAN ANTONIO, TEXAS 78209	50.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/9/05	MR. OR MRS. PETER M. HOLT 2191 LITTLE BLANCO ROAD BLANCO, TEXAS 78606	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/15/05	PAT MALONEY SR. 6607 LAUREL HILL SAN ANTONIO, TEXAS 78229	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/15/05	CHARLES R. BLANK 9245 MARYMONT PARK SAN ANTONIO, TEXAS 78217	300.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

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Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/15/05	SAN ANTONIO POLICE OFFICER'S ASSN 1939 N.E. LOOP 410, SUITE 300 SAN ANTONIO, TEXAS 78217	500.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/15/05	JOHN K. MILLER 24165 IH10 WEST, SUITE 217 SAN ANTONIO, TEXAS 78257	500.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/24/05	ARTHUR H. BAYERN 745 E. MULBERRY, SUITE 300 SAN ANTONIO, TEXAS 78212	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/24/05	RICHARD M. TRENCH 9115 AUTUMN LEAF SAN ANTONIO, TEXAS 78217	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/24/05	C. H. WARNKEN P.O. DRAWER B PLEASANTON, TEXAS 78064	100.00	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/24/05	JAMES KREMPEN 13777 JUDSON ROAD #105 SAN ANTONIO, TEXAS 78233	100.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/24/05	JUDSON BUSINESS CENTER 13777 JUDSON ROAD, #105 SAN ANTONIO, TEXAS 78233	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/25/05	ARTHUR L. CAMPSEY 5833 WOODRIDGE OAKS SAN ANTONIO, TEXAS 78249	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/25/05	VICTOR M. HELBLING 16427 CALICO CREEK DRIVE SAN ANTONIO, TEXAS 78247	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/26/05	CATHERINE TAYLOR 1508 AVENUE J HONDO, TEXAS 78861	25.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form. 2005 APR -7 PM 1:10 Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/27/05	LAWRENCE HAASS 735 SWEETBRUSH SAN ANTONIO, TEXAS 78258	300.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/27/05	KARIN STANLEY 3431 ARROYO OAK DRIVE SAN ANTONIO, TEXAS 78247	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/27/05	RICHARD G. ROUSE, MD 13707 VILLAGE WOOD SAN ANTONIO, TEXAS 78216	125.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	JIM REED 7317 ASHTON PLACE SAN ANTONIO, TEXAS 78229	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	NANCY F. TEMPERILLI 3007 MANILA DRIVE SAN ANTONIO, TEXAS 78217	50.00	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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1 Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/28/05	DWIGHT L. BLACK 29619 FAIRVIEW PLACE FAIR OAKS RANCH, TEXAS 78015	25.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	BERNARD T. SWIFT, JR. 101 WINDING WAY DRIVE SAN ANTONIO, TEXAS 78232	500.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	WILBUR L. MATTHEWS, JR. 9121 VALLEY VIEW LANE EAST SAN ANTONIO, TEXAS 78217	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	RICKY PARADISE 14812 BOND OVERLAND PARK, KANSAS 66223	50.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/28/05	DR. SUSAN BLACKWOOD 706 BIRDSONG S. SAN ANTONIO, TEXAS 78258	50.00	

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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1 Total pages Schedule A: 8

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/24/05	SUNBELT VENTURES, INC. 13777 JUDSON ROAD, SUITE 105 SAN ANTONIO, TEXAS 78233	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/21/05	CLIFFORD A. HICKEL 3907 PRIVET PLACE SAN ANTONIO, TEXAS 78259	25.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/30/05	CESAR SERNA 120 VILLITA STREET SAN ANTONIO, TEXAS 78205		500.00

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/30/05	SHELTON & VALADEZ, P.C. 600 NAVARRO, SUITE 500 SAN ANTONIO, TEXAS 78205		500.00

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/30/05	CHARLES L. FRESQUEZ 8218-B LOUISIANA NE ALBUQUERQUE, NEW MEXICO 87113		250.00

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/14/05	THE QUARRY GOLF CLUB	5,548.74

8 Purpose of payment (See instructions regarding type of information required.): FUNDRAISER - GOLF TOURNAMENT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/19/05	UPS STORE	322.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/28/05	KNIGHTS OF COLUMBUS	100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/30/05	DEBBIE MARTINEZ	1,866.86

Purpose of payment (See instructions regarding type of information required.): FUNDRAISER - SERVICES

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/31/05	ALLIED ADVERTISING	862.00

8 Purpose of payment (See instructions regarding type of information required.): ADVERTISING - SIGNS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/1/05	THE GNU GROUP	750.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/4/05	EASY DRIVE	139.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/25/05	ALLIED ADVERTISING	942.82

Purpose of payment (See instructions regarding type of information required.): ADVERTISING - SIGNS

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

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2005 APR -7 PM 1:11

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/7/05	FOUR SEASONS SPORTS SHOP	974.25

8 Purpose of payment (See instructions regarding type of information required.): ADVERTISING - SHIRTS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/7/05	CLEAR CHANNEL OUTDOOR	5,760.00

Purpose of payment (See instructions regarding type of information required.): ADVERTISING - OUTDOOR

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/21/05	ALEX NAVA	397.00

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT - POSTAGE/OFFICE SUPPLIES

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/22/05	PEOPLE BUSINESS SOLUTIONS, INC. - DAVID ORONA	1,282.62

Purpose of payment (See instructions regarding type of information required.): STATIONARY - LETTERHEAD/ENVELOPES

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2005 APR -7 PM 1:10

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/1/05	PEOPLE BUSINESS SOLUTIONS, INC - DAVID ORONA	3,066.92

8 Purpose of payment (See instructions regarding type of information required.): ADVERTISING - BROCHURE

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/1/05	CHARLES ROBLES	68.27

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT - PRINTING (KINKOS)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/1/05	CHARLES ROBLES	39.76

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT - OFFICE SUPPLIES (OFFICE MAX)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/1/05	CHARLES ROBLES	102.48

Purpose of payment (See instructions regarding type of information required.): REIMBURSEMENT - OFFICE SUPPLIES (OFFICE DEPOT)

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

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POLITICAL EXPENDITURES

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CITY CLERK

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR -7 PM 1:18

Total pages Schedule F: 5

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/4/05	MONICA GUHLIN	54.07

8 Purpose of payment (See instructions regarding type of information required.)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
REIMBURSEMENT - FUNDRAISER DECORATIONS (BALLOON EXPRESSIONS)	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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CITY CLERK

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR -7 PM 1:10

1 Total pages Schedule G: 1

2 FILER NAME: CHRISTOPHER "CHIP" HAASS

3 ACCOUNT # (Ethics Commission filers): 00000001

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
2/22/05	CITY OF SAN ANTONIO	CANDIDATE PACKET	10.00	☐
2/22/05	CITY OF SAN ANTONIO	FILING FEE	100.00	☐
				☐
				☐
				☐
				☐

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED