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

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

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See backside for instructions

1 ACCOUNT #	2 Total pages filed: 6

3 CANDIDATE / OFFICEHOLDER NAME	TITLE	FIRST DAVID	MI A.
	NICKNAME	LAST GARCIA	SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #	Amount
Legal	Totals

Date Processed

Date Imaged

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify) _____

5 ORIGINAL PERIOD COVERED

Month	Day	Year		Month	Day	Year
1	1	02	THROUGH	6	30	02

6 EXPLANATION OF CORRECTION

At the time of filing the only information on hand was the deposit slip with check amounts. The bank forwarded the photos of the checks with the contributors' names and addresses. That is why initially the disclosure left blanks for the contributors name. Sorry about the delay.

7 AFFIDAVIT

GUY HAMILTON
MY COMMISSION EXPIRES
March 16, 2005

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, under penalty of perjury, that I did not intend to violate a reporting requirement when I filed the original report.

David Garcia
Signature of Candidate or Officeholder

Sworn to and subscribed before me by David A. Garcia this the 25 day of July, 20 02.

to certify which, witness my hand and seal of office.

Signature of officer administering oath	Guy Hamilton	Notary
	Printed name of officer administering oath	Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

(Revised 05/11/2000)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME: David A Garcia

3 ACCOUNT # (Ethics Commission filers)

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)
4/22/02	Sue Koplin 6929 Camp Bullis Rd. S.A, TX 78256	250.00	

9 Principal occupation (Optional)

10 Employer (Optional)

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)
4/22/02	Steve Waters 1419 East Mandalay S.A, TX 78212	150.00	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	Leo Perron 3707 N. St. Mary's S.A, TX 78212	200.00	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	T.E. Pawell S.A, TX 78205	250.00	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	Jim Bastoni 6929 Camp Bullis S.A, TX 78256	1,000.00	

Principal occupation (Optional)

Employer (Optional)

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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4/22/02	G W Worth 6 Contributor address; City; State; Zip Code 6929 Camp Bullis Rd. S.A, TX 78256	1000 wt	

9 Principal occupation (Optional)

10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
4/22/02	Cary Barton Contributor address; City; State; Zip Code 700 N. St. Mary's S.A, TX 78205	250 wt	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
4/22/02	Carl Raba Contributor address; City; State; Zip Code P.O. Box 690287 S.A, TX 78269	500 wt	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
4/22/02	Eddie Smith Contributor address; City; State; Zip Code 9331 Corporate Dr. Selma, TX 78154	250 wt	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
4/22/02	Fred Raley Contributor address; City; State; Zip Code 3702 Inwood Forest S.A, TX 78230	250 wt	

Principal occupation (Optional)

Employer (Optional)

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4/22/02	Douglas Koch 106 Koch Bass Lane Blanco, TX 78606	500 w	

9 Principal occupation (Optional)

10 Employer (Optional)

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)
4/22/02	Darren Casey 514 Aaron Parkway S.A, TX 78216	250 w	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	T. Westermann 3 Blenheim S.A, TX 78209	100 w	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	Sam Barshop 900 Isom Rd. S.A, TX 78209	250 w	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	C. Barron 5150 N. Loop 410 W S.A, TX 78240	400 w	

Principal occupation (Optional)

Employer (Optional)

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4/22/02	Nancy Hunt 8100 Countryside S.A, TX	500 ck	

9 Principal occupation (Optional)

10 Employer (Optional)

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)
4/22/02	Michael Moore 9723 Wind Walk S.A TX 78250	250 ck	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	Robert Worth 217 College Blvd. S.A, TX 78209	300 ck	

Principal occupation (Optional)

Employer (Optional)

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)
4/22/02	Joey Guerra 11202 Disco Dr. S.A, TX 78216	200 ck	

Principal occupation (Optional)

Employer (Optional)

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)
6/18/02	T. Frost P.O. Box 1600 S.A, TX 78296	50 ck	

Principal occupation (Optional)

Employer (Optional)

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4/22/02	Liam Heimer 1000 San Pedro Ave San Antonio, TX 78216	250 ck	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
4/22/02	David Minton 111 Soledad S.A, TX 78205	100 ck	

Principal occupation (Optional) | Employer (Optional)

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)
4/22/02	John Pelayo 111 Soledad S.A, TX 78205	500 ck	

Principal occupation (Optional) | Employer (Optional)

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)
4/22/02	Bill Kaufman 110 W. Houston S.A, TX 78205	1,000 ck	

Principal occupation (Optional) | Employer (Optional)

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)
4/22/02	Chesley Swann P.O. Box 6862 S.A, TX 78209	100 ck	

Principal occupation (Optional) | Employer (Optional)

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