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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

RECEIVED CITY OF SAN ANTONIO CITY CLERK 2003 MAY 19 A 11:42

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers): 00000000

2 Total pages this report: 1/35

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr. FIRST: Art A. MI:

NICKNAME: LAST: Hall SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2243 Shady Rock Circle
PO Box 866
San Antonio TX 78293

5 CAMPAIGN TREASURER NAME

TITLE: Mr. FIRST: Chad J. MI:

NICKNAME: LAST: Muller SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

PO Box 866

San Antonio TX 78293

7 CAMPAIGN TREASURER PHONE

AREA CODE: (210) PHONE NUMBER: 479-9018 EXTENSION:

8 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 - FR)

9 PERIOD COVERED

Month Day Year: 04/26/2003 THROUGH Month Day Year: 05/19/2003

10 ELECTION

ELECTION DATE Month Day Year: 05/27/2003

ELECTION TYPE: ☐ Primary ☒ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): Other -- City Council (SAT) 8

13 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

(Effective 12/16/1999)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2003 MAY 19 A 11: 42

14 C/OH NAME
Mr. Art A. Hall

15 ACCOUNT # (Ethics Commission filers)
00000000

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This listing includes 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	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occured during this reporting period. (Sign affidavid below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 2505.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 21845.32

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 247.56
4.	**TOTAL POLITICAL EXPENDITURES**	$ 18015.97

OUTSTANDING LOAN TOTALS

5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 3785.39

19 AFFIDAVIT

SANDRA GARZA NOTARY PUBLIC STATE OF TEXAS EXPIRES 08-28-2006

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Art A. Hall, this the ~~24th~~ 19th day of ~~April~~ May AD, 2003, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Sandra Garza Printed name of officer administering oath | Notary Title of officer administering oath

(Effective 11/16/1999)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED CITY OF SAN ANTONIO CITY CLERK

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A 11:45

1 Total pages this report: 3/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
05/19/2003	Associated General Cotnractors of America PAC 10806 Gulfdale San Antonio TX 78216	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
04/29/2003	Mr. and Dr. Terrell W. and Bette Marquez Austin 11811 Queenspoint Drive San Antonio TX 78251	99.16	Sign materials
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
04/29/2003	Mr. and Dr. Terrell W. and Bette Marquez Austin 11811 Queenspoint Drive San Antonio TX 78251	123.95	Sign materials
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/10/2003	Dr. & Mrs. Salvador P. & Fe M. Baylan 11 Remington Way San Antonio TX 78258	500.00	
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)
05/06/2003	Mr. Michael D. Beldon PO Box 13380 San Antonio TX 78213	250.00	
Principal occupation (Optional)	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED CITY OF SAN ANTONIO CITY CLERK

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A 11:42

1 Total pages this report: 4/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
04/28/2003	Mrs. Maria Berriozabal 1148 W. Russell Place San Antonio TX 78201	100.00	

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)
05/10/2003	Mr. & Mrs. Robert D. & Kimberly S. Bowers 1910 Thicket Trail Drive San Antonio TX 78248-1812	100.00	

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)
05/07/2003	Ms. Olga Brown 111 Soledad,Suite 110 San Antonio TX 78205	100.00	

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)
05/13/2003	Mr. & Mrs. George W. & Bettye A. Carpenter 4802 6th Street Lubbock TX 79416	100.00	

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)
05/13/2003	Mr. Charles E. Cheever 501 Terrell Road San Antonio TX 78209	250.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED CITY OF SAN ANTONIO CITY CLERK 2003 MAY 19 AM 10:2

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/13/2003	Dr. & Mrs. James & Juanita Chua-Tuan 9303 Quinton Avenue Lubbock TX 79424	100.00	

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)
05/09/2003	Mr. and Mrs. Merritt M. and Karen Clements 307 West Gramercy Place San Antonio TX 78212-2825	100.00	

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)
05/05/2003	Mr. & Mrs. Jesse & Berta De Loach 13706 Forest Rock Drive San Antonio TX 78231	100.00	

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)
04/29/2003	Mr. & Mrs. Ernest & Jennifer Dewinne 13326 Syracuse San Antonio TX 78249	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)
05/06/2003	Mr. and Mrs. Jim and Andrea Eskin 10410 Pelican Oak Drive San Antonio TX 78254-6727	100.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED CITY OF SAN ANTONIO CITY CLERK 2003 MAY 19

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/03/2003	Ms. Vernell Everett Unknown San Antonio TX 78205	150.00	Baskets for Election Ni - ght celebration

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)
05/19/2003	Ms. Lisa M. Fairfax 1505 Sharon Drive Silver Spring MD 20910	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)
05/13/2003	Paul W. or Anna R. Foster 1815 Fieldstone Road San Antonio TX 78232	100.00	

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)
05/13/2003	Mr. & Mrs. Santos & Norma L. Fraga 7011 Holly Mountain San Antonio TX 78250	100.00	

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)
05/04/2003	Ms. Bennye E. Frazier 911 Haltown Drive San Antonio TX 78213-2018	100.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED CITY OF SAN ANTONIO CITY CLERK

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A 11:42

1 Total pages this report: 7/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/10/2003	Mr. & Mrs. Larry & Meredith Freeman 8452 Fredericksburg,#340 San Antonio TX 78229	100.00	

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)
05/19/2003	Ms. Veronica Freeman 7828 Komalty Dallas TX 75217	100.00	

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)
05/09/2003	Mr. and Mrs. Elliott M. and Dorothy B. Friday 507 Center Street San Antonio TX 78202	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)
05/13/2003	Friends of Nelson Wolff 12726 Cimarron Path San Antonio TX 78249	500.00	

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)
05/07/2003	Tom Frost III PO Box 2361 San Antonio TX 78298	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

RECEIVED CITY SECRETARY SAN ANTONIO 2003 MAY 19 A 11:41

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/10/2003	Mr. Henry L. Galindo 315 Finton Avenue San Antonio TX 78204-2109	100.00	

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)
05/19/2003	Ms. Carmen T. Garza 4011 Sylvan Oaks Drive San Antonio TX 78229	100.00	

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)
05/19/2003	Mr. Ronald T. Green 8570 Dongal San Antonio TX 78250-2023	100.00	

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)
05/07/2003	Elie Guggenheim PO Box 15567 San Antonio TX 78212	100.00	

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)
04/29/2003	Mr. Dexter E. Hall 1400 Blue Bell Road,Apt. 501 Houston TX 77038	500.00	

Principal occupation (Optional) | Employer (Optional)

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

RECEIVED SAN ANTONIO

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

2003 MAY 19 A.M.

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
04/29/2003	Ms. Michelle Hall 6415 Standing Oaks Street Houston TX 77050	200.00	

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)
05/13/2003	Ms. Michelle Hall 6415 Standing Oaks Street Houston TX 77050	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)
05/07/2003	Dr. Robert L.M. Hilliard 710 Augusta San Antonio TX 78215	100.00	

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)
05/10/2003	Mr. Tommye J. Holmes 7415 Meadow Breeze San Antonio TX 78227	100.00	

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)
05/19/2003	Ms. Wray C. Hood 482 Hub Avenue San Antonio TX 78220	100.00	

Principal occupation (Optional)	Employer (Optional)

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

RECEIVED 2003 MAY 19 A 11:

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/04/2003	Ms. Mary Lois Howard 2363 Faett Court Ft. Worth TX 76119	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☒ out-of-state PAC(ID# C00027342) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/05/2003	IBEW #500 -- COPE 1125 15th Street,NW Washington DC 20005	500.00	

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)
05/13/2003	Ironworkers State COPE Fund 3003 Dawn Drive,Suite 104 Georgetown TX 78628	500.00	

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)
04/29/2003	Mrs. & Mr. Jean R. & Robert B. James 3418 River Path San Antonio TX 78230	500.00	

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)
05/19/2003	Mrs. & Mr. Jean R. & Robert B. James 3418 River Path San Antonio TX 78230	350.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

RECEIVED CITY SECRETARY'S OFFICE 2003 MAY 19 AM 11:43

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/06/2003	Ms. June R. Kachtik 3415 Rock Creek Run San Antonio TX 78230	100.00	

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)
05/13/2003	Ms. Amy Kastely 233 Lotus San Antonio TX 78210	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)
05/09/2003	Farley P. Katz M. Carolyn Fuentes 101 Newbury Terrace San Antonio TX 78209-2834	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)
05/19/2003	Mr. Richard Kottle 9646 Athlone Drive,#111 Dallas TX 75218	117.21	

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)
05/19/2003	Mr. Jonathan C. Lane 9318 Oakland Road San Antonio TX 78249	250.00	

Principal occupation (Optional)
Employer (Optional)

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

RECEIVED CITY SECRETARY SAN ANTONIO CITY CLERK

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A 11:43

1 Total pages this report: 12/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/10/2003	Drs. Leonard E. and Barbara A. Lawrence 3107 Sable Creek San Antonio TX 78259	100.00	

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)
05/05/2003	Mr. David McQuade Leibowitz 111 Soledad,20th Floor San Antonio 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)
05/02/2003	Mr. Donze Lopez 231 Brees Boulevard San Antonio TX 78209	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)
05/07/2003	Mr. Donze Lopez 231 Brees Boulevard San Antonio TX 78209	500.00	

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)
05/07/2003	Mr. Pat Maloney,Jr. 239 East Commerce San Antonio TX 78205	500.00	

Principal occupation (Optional)
Employer (Optional)

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 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 13/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
04/28/2003	Mr. Pat Maloney,Sr. 6607 Laurel Hill San Antonio TX 78229	500.00	

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)
05/07/2003	Mr. Albert W. McKnight 733 South Alamo Street San Antonio TX 78205	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)
05/07/2003	Ms. Yvette Mouton 20915 El Suelo Bueno San Antonio TX 78258	100.00	

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)
05/19/2003	Chad Muller 2627 Country Hollow San Antonio TX 78209	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)
05/04/2003	Mr. Jack D. Myer 3410 Elm Hill San Antonio TX 78230	50.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/13/2003	Mr. Jack D. Myer 3410 Elm Hill San Antonio TX 78230	450.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
05/05/2003	Ms. Debra Nicholas 13075 North Hunters Circle San Antonio TX 78230	300.00	
Principal occupation (Optional)	Employer (Optional)		
05/02/2003	Mr. & Mrs. Charles D. & Kristine K. Olson 3708 Chimney Ridge Drive Waco TX 76708	100.00	
Principal occupation (Optional)	Employer (Optional)		
05/19/2003	Ms. Rosie L. Palmore 10335 Medallion Drive San Antonio TX 78245	200.00	
Principal occupation (Optional)	Employer (Optional)		
05/13/2003	Mr. John Peveto 320 E. Nakoma San Antonio TX 78216	500.00	
Principal occupation (Optional)	Employer (Optional)		

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 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/19/2003	Boone Powell 1138 East Commerce Street San Antonio TX 78205	100.00	

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)
05/09/2003	Daniel V. Pozza 19107 Autumn Garden San Antonio TX 78258	100.00	

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)
05/19/2003	Mr. & Mrs. Norman & Cynthia S. Renfro 503 Ridge Bluff San Antonio TX 78216	100.00	

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)
05/07/2003	Mr. & Mrs. Mark & Kelly Revis 534 Greenwich Lane Coppell TX 75019	500.00	

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)
05/13/2003	Mr. Darby Riley 320 Lexington Avenue San Antonio TX 78215	100.00	

Principal occupation (Optional) | Employer (Optional)

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 1
(FOR FORMS C/OH & SPAC)

RECEIVED CITY SECRETARY SAN ANTONIO 2003 MAY 19 AM 10:15

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/09/2003	Mr. Robert V. Rodriguez 10910 Whisper Ridge San Antonio TX 78230	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)
05/10/2003	Mr. Alfred W. Rohde Jr. 9510 La Rue Street San Antonio TX 78217-5010	500.00	

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)
05/13/2003	Mr. & Mrs. Michael J.C. & Jutta M. Von Borg Roth 3803 Mill Court San Antonio TX 78230	100.00	

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)
05/05/2003	Mr. Simon Salas 4831 Clemson San Antonio TX 78249	75.00	

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)
05/19/2003	Mr. & Mrs. Leslie E. Norton & Diane Sinclair 28127 Ralph Fair Road Fair Oaks Ranch TX 78015	100.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19

1 Total pages this report: 17/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
05/02/2003	Mr. & Mrs. William D. & Geraldine Smedler 62 Oakwell Farms Pkwy. San Antonio TX 78218	100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/13/2003	Mr. & Mrs. William D. & Geraldine Smedler 62 Oakwell Farms Pkwy. San Antonio TX 78218	50.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/19/2003	Annalyn G. Smith 2827 Chisolm Trail San Antonio TX 78217	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/13/2003	Mr. & Mrs. David A. & Jennifer B. Spencer 26610 Harmony Hills San Antonio TX 78258	500.00	
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)
05/09/2003	Mr. & Mrs. Paul K. & Telea J. Stafford 2236 Southern Circle Carrollton TX 75006	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The **INSTRUCTION GUIDE** explains how to complete this form.

1 Total pages this report: 18/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
05/09/2003	Rev. Dr. Walter L. Starks 11831 Brandon Oaks San Antonio TX 78253	200.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/19/2003	Mr. and Mrs. Windsor J. or Beverly J. Tanner 343 Canton San Antonio TX 78202	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/10/2003	Mr. Barney J. Tearney 5409 Encino Park Road San Antonio TX 78240	200.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/19/2003	Ms. Bonita A. & Annie M. Terry 2552 W. Woodlawn Ave. San Antonio TX 78228	100.00	
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)
05/19/2003	Mr. & Mrs. Daniel M. Pacheco and Karen M. Thompson 419 W. Lynwood San Antonio TX 78212	100.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 19/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/07/2003	Ms. Laura Thompson 622 South Hackberry San Antonio TX 78203	100.00	

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)
05/19/2003	Mr. Peter Torres 11622 Caprock San Antonio TX 78205	100.00	

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)
05/02/2003	Mr. & Mrs. David & Markitta Travillion 9338 Chattanooga Drive San Antonio TX 78240	75.00	

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)
05/13/2003	Mrs. Mattie Inez Traylor 8721 Wandering Trail Drive Potomac MD 20854	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)
05/19/2003	Mr. & Mrs. Thomas N. & Laura B. Turk 6335 Circle Oak Bulverde TX 78163	250.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19

1 Total pages this report: 20/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/06/2003	Ms. Debbie A. Valdez 4041 Medical Drive #113 San Antonio TX 78229	100.00	

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)
05/08/2003	Valero Political Action Committee PO Box 500 – MS -- 3G San Antonio TX 78292	500.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☒ out-of-state PAC(ID# C00116020) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05/02/2003	Vulcan Materials Company PAC PO Box 385014 Birmingham AL 35238	300.00	

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)
05/19/2003	Mr. Cornell Walker 45 NE Loop 410,Suite 560 San Antonio TX 78216	100.00	

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)
05/19/2003	Mr. & Mrs. Rich & Georg'a Walsh 712 Walder Trail San Antonio TX 78258	200.00	Fundraiser materials

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 21/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
05/19/2003	Mr. & Mrs. Rich & Georg'a Walsh 712 Walder Trail San Antonio TX 78258	50.00	

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)
05/02/2003	Mr. and Mrs. Roy L. and Carolyn Washington 243 Brees Boulevard San Antonio TX 78209	100.00	

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)
05/19/2003	Mr. & Mrs. Ed L. & Ella P. White,Jr. 10491 Tippecanoe San Antonio TX 78245	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)
05/05/2003	Mr. Shelly D. Faris & Parker A. Wilson 105 Lemonwood Drive San Antonio TX 78213	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)
05/07/2003	Mr. & Mrs. John & Janet Young 9102 Autumn Skies San Antonio TX 78254	500.00	

Principal occupation (Optional)
Employer (Optional)

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

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 22/35

2 FILER NAME: Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers): 00000000

4 TOTAL OF UNITEMIZED LOANS: ⇨⇨⇨⇨⇨⇨ $ 0.00

5 Date of loan: 04/26/2003

6 Is lender a financial Institution? N

7 Name of lender: Mr. Art A. Hall ☐ out-of-state PAC(ID#_____)

8 Lender address; City; State; Zip Code
2243 Shady Rock Circle
PO Box 866
San Antonio TX 78293

9 Loan Amount ($): 1307.30

10 Interest rate: 0.00

11 Maturity date: 05/31/2003

12 Description of Collateral
☒ none

13 GUARANTOR INFORMATION
☒ not applicable

14 Name of guarantor

15 Guarantor address; City; State; Zip Code

16 Amount Guaranteed ($)

17 Principal Occupation

18 Employer

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 23/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/05/2003	AT&T Wireless PO Box 8220 Aurora IL 60572-8220	337.20

8 Purpose of expenditure (See instructions regarding type of information required.)
Mobile bill payment

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 ($)
05/14/2003	Alamo City Chamber of Commerce 600 Hemisfair Plaza Way,Building 406-10 San Antonio TX 78205	184.15

Purpose of expenditure (See instructions regarding type of information required.)
Event tickets

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 ($)
05/10/2003	Allied Advertising 3700 Blanco Road San Antonio TX 78212	522.00

Purpose of expenditure (See instructions regarding type of information required.)
Remaining payment for signs

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 ($)
05/02/2003	Amerisuites Hotel 10101 IH-10 West San Antonio TX 78230	462.32

Purpose of expenditure (See instructions regarding type of information required.)
Election weekend headquarters

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 24/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/28/2003	Anthony Armstrong Agency PO Box 5302 San Antonio TX 78201	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Election Night band

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 ($)
05/05/2003	Avis Car Rental -- San Antonio Airport San Antonio TX 78205	210.46

Purpose of expenditure (See instructions regarding type of information required.)
Car rental election week

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 ($)
05/09/2003	Frost National Bank PO Box 1600 San Antonio TX 78296	12.25

Purpose of expenditure (See instructions regarding type of information required.)
Check order charge

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 ($)
05/14/2003	Frost National Bank PO Box 1600 San Antonio TX 78296	25.00

Purpose of expenditure (See instructions regarding type of information required.)
Bank charge

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED CITY SECRETARY

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A

1 Total pages report: 25/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/14/2003	Frost National Bank PO Box 1600 San Antonio TX 78296	50.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Bank charge

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 ($)
05/08/2003	Gnu Group 14745 Babcock,Suite #706 San Antonio TX 78249	800.00

Purpose of expenditure (See instructions regarding type of information required.)
Mailer design

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 ($)
05/09/2003	Gnu Group 14745 Babcock,Suite #706 San Antonio TX 78249	2290.99

Purpose of expenditure (See instructions regarding type of information required.)
Design fee,printing/postage

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 ($)
05/10/2003	Golden Wok Restaurant 8822 Wurzbach San Antonio TX 78230	23.50

Purpose of expenditure (See instructions regarding type of information required.)
Meal with campaign staff

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

POLITICAL EXPENDITURES

RECEIVED CITY OF SAN ANTONIO

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 AM

1 Total pages report: 26/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/12/2003	Golden Wok Restaurant 8822 Wurzbach San Antonio TX 78230	39.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Meal with campaign staff

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 ($)
05/13/2003	Golden Wok Restaurant 8822 Wurzbach San Antonio TX 78230	7.79

Purpose of expenditure (See instructions regarding type of information required.)
Meal w/ campaign staff

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 ($)
04/28/2003	Mr. Art A. Hall 2243 Shady Rock Circle PO Box 866 San Antonio TX 78293	1300.00

Purpose of expenditure (See instructions regarding type of information required.)
Loan reimbursement

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 ($)
05/05/2003	Mr. Art A. Hall 2243 Shady Rock Circle PO Box 866 San Antonio TX 78293	600.00

Purpose of expenditure (See instructions regarding type of information required.)
Loan reimbursement

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

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

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19

1 Total pages report: 27/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/29/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	73.05

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for Election Day supplies

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 ($)
05/02/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Election Night celebration petty cash

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 ($)
05/03/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	26.97

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for meal for volunteers

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 ($)
05/03/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	288.30

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for meal for volunteers and hotel he - adquarters

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 28/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/03/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	469.10

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for County Line election night food

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 ($)
05/13/2003	Mrs. Stephanie M. Hall 2243 Shady Rock Circle San Antonio TX 78231	124.97

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for event food

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 ($)
04/29/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	99.76

Purpose of expenditure (See instructions regarding type of information required.)
Copy card

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 ($)
05/01/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	34.41

Purpose of expenditure (See instructions regarding type of information required.)
Copies

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 OF SAN ANTONIO
CITY CLERK
2003 MAY 19 A 11:43

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 29/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/02/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	50.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Copy card

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 ($)
05/03/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	34.86

Purpose of expenditure (See instructions regarding type of information required.)
Copies

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 ($)
05/03/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	115.47

Purpose of expenditure (See instructions regarding type of information required.)
Print outs

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 ($)
05/03/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	33.33

Purpose of expenditure (See instructions regarding type of information required.)
Copies

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 30/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/03/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	69.74

8 Purpose of expenditure (See instructions regarding type of information required.)
Print outs

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 ($)
05/09/2003	Kinko's 3740 NW Loop 410 San Antonio TX 78229	7.55

Purpose of expenditure (See instructions regarding type of information required.)
Business cards

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 ($)
05/05/2003	Legacy Office Centers,Inc. 8000 IH-10 West San Antonio TX 78230	1625.00

Purpose of expenditure (See instructions regarding type of information required.)
Office space

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 ($)
04/30/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	500.00

Purpose of expenditure (See instructions regarding type of information required.)
Election day block walkers,phone bankers

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 31/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/30/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	1000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Partial fee payment

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 ($)
05/02/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	231.16

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for Amerisuites Hotel,election weeke - nd headquarters

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 ($)
05/02/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	800.00

Purpose of expenditure (See instructions regarding type of information required.)
Election day block walkers,phone bankers

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 ($)
05/08/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	1500.00

Purpose of expenditure (See instructions regarding type of information required.)
Fee

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

POLITICAL EXPENDITURES

RECEIVED CITY OF SAN ANTONIO CITY CLERK 2003 MAY 19 A 11:21

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 32/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/08/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for partial payments for 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 ($)
05/09/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Petty cash

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 ($)
05/10/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	101.77

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for campaign photo development,offi - ce 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 ($)
05/10/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	802.25

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for T-shirts

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

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

POLITICAL EXPENDITURES

SCHEDULE F

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The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 A

1 Total pages report: 33/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/10/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	102.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for rebar

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 ($)
05/16/2003	Ms. Debra Martinez 3409 Triola San Antonio TX 78230	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Petty cash

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 ($)
05/11/2003	Phi Beta Sigma Unknown San Antonio TX 78205	85.00

Purpose of expenditure (See instructions regarding type of information required.)
District 8 event ticket

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 ($)
05/09/2003	Mr. Fernando Rangel Unknown San Antonio TX 78205	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Contract labor

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 34/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/08/2003	San Antonio News PO Box 240022 San Antonio TX 78224	100.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Ad

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 ($)
05/11/2003	Southwestern Bell Telephone PO Box 4844 Houston TX 77097-0079	65.07

Purpose of expenditure (See instructions regarding type of information required.)
Phone bill

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 ($)
04/28/2003	U.S. Postal Service Downtown Station San Antonio TX 78205-9998	230.00

Purpose of expenditure (See instructions regarding type of information required.)
Stamps

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 ($)
04/29/2003	U.S. Postal Service Downtown Station San Antonio TX 78205-9998	111.00

Purpose of expenditure (See instructions regarding type of information required.)
Stamps

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

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2003 MAY 19 A 11:43

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 35/35

2 FILER NAME
Mr. Art A. Hall

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/01/2003	U.S. Postal Service Downtown Station San Antonio TX 78205-9998	296.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Stamps

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 ($)
05/05/2003	U.S. Postal Service Downtown Station San Antonio TX 78205-9998	276.00

Purpose of expenditure (See instructions regarding type of information required.)
Stamps

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 ($)
05/14/2003	Mr. Shelly D. Faris & Parker A. Wilson 105 Lemonwood Drive San Antonio TX 78213	92.77

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for campaign business cards

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 ($)
05/09/2003	Mr. & Mrs. John & Janet Young 9102 Autumn Skies San Antonio TX 78254	158.22

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for supplies

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