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

See backside for instructions

1 ACCOUNT #

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: John | MI: H.

NICKNAME | LAST: Sanders | SUFFIX

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [x] 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: 01/01/01 THROUGH Month Day Year: 04/27/01

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Legal | Totals

Date Processed

Date Imaged

6 EXPLANATION OF CORRECTION

- This corrected report supersedes the corrected report date stamped 05/25/01.
- Original report filed on 5/24/01 incorrectly overlapped reporting periods – 30th Day + 8th Day
- This report includes contributions and expenditures not reported on the original report of 05/24/01
- Duplicate expenditures reported on Schedule F that should not have been reported were deleted.

7 AFFIDAVIT

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.

AFFIX NOTARY STAMP / SEAL ABOVE

MELINDA S. LOPEZ NOTARY PUBLIC STATE OF TEXAS EXPIRES 04-04-2005

Signature of Candidate or Officeholder

Sworn to and subscribed before me by John H. Sanders this the 27th day of December, 2001.

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

Melinda S. Lopez — Signature of officer administering oath

Melinda S. Lopez — Printed name of officer administering oath

Notary — Title of officer administering oath

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

Printed on recycled paper

(Revised 05/11/2000)

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

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)

2 Total pages filed: 28

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: John | MI: H.

NICKNAME | LAST: Sanders | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

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

5019 Lakewood
San Antonio, Texas 78220

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Howard | MI:

NICKNAME | LAST: Anderson | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

101 Hub Ave.
San Antonio, Texas 78220

7 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(210) 227-5824

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: 01/01/01 THROUGH Month Day Year: 03/26/01

10 ELECTION

ELECTION DATE Month / Day / Year

ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known): City Council, District 2

13 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

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

CITY OF SAN ANTONIO
CITY CLERK

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

01 DEC 26 AM 11:29

15 ACCOUNT # (Ethics Commission filers)

16 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

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit 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	$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 22,660.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ -0-
	4. TOTAL POLITICAL EXPENDITURES	$ 16,934.46
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

19 AFFIDAVIT

MELINDA S. LOPEZ
NOTARY PUBLIC
STATE OF TEXAS
EXPIRES
04-04-2005

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.

John H. Sanders

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John H. Sanders, this the 26th day of December, 20 01, to certify which, witness my hand and seal of office.

Melinda S. Lopez — Signature of officer administering oath

Melinda S. Lopez — Printed name of officer administering oath

Notary — Title of officer administering oath

Printed on recycled paper

Revised 05/11/2000

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 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: 29

2 FILER NAME: John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

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)
01/10/01	Kenneth Wolf 1020 Northeast Loop 410 San Antonio, Texas 78209	$100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/12/01	Metropolitan Contracting Co, LTD 990 Isom San Antonio, Texas 78216	$250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/23/01	Wm. Kennon Vickrey 7334 Blanco Road #7 San Antonio, Texas 78216	$250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/24/01	J. Cary Barton One Riverwalk Place Ste 1825 San Antonio, Texas 78205	$250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/24/01	Robert Hunt 8106 Countryside San Antonio, Texas 78209	$250.00	

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.

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

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1 Total pages this Schedule A1: 29

2 FILER NAME: John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

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)
01/24/01	Charles Midkiff 21321 Babcock #7 San Antonio, Texas 78255	$250.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/24/01	John Rogers 2 Enchanted Wood San Antonio, Texas 78248	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/25/01	Graham Weston 112 E. Pecan St #6 San Antonio, Texas 78205	$500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/26/01	Sam Barshop 900 Isom Road, Ste. 300 San Antonio, Texas 78216	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/27/01	Walter Embrey 1100 NE Loop 410, Ste. 900 San Antonio, Texas 78209	$750.00	

Principal occupation (Optional) | Employer (Optional)

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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)

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1 Total pages this Schedule A1: 29

2 FILER NAME: John H. Sanders

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)	9 Principal occupation (Optional)	10 Employer (Optional)
01/29/01	G. W. Worth, JR 6829 Camp Bullis Road San Antonio, Texas 78256	$ 1000.00			
01/29/01	Jack Spector 227 Devine San Antonio, Texas 78209	$ 100.00			
01/ /01	Michael Birnbaum 70 NE Loop 410, Ste 750 San Antonio, Texas 78216	$ 250.00			
01/30/01	Michael Moore 9723 Mid Walk San Antonio, Texas 78230	$ 250.00			
01/30/01	Brenda Vickrey Johnson 13055 N. Hunters Cir San Antonio, Texas 78230	$ 250.00			

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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)

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1 Total pages this Schedule A1:

2 FILER NAME John H. Sanders

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)
01/30/01	Lewis Westerman 3 Blenheim San Antonio, Texas 78209	$250.00	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/31/01	Chesley Swan III P.O. Box 6862 San Antonio, Texas 78209	$250.00	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/31/01	James Bastoni 106 Ottawa Road San Antonio, Texas 78231	$1000.00	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/31/01	C. Edward Barron II P.O. Box 677 Helotes, Texas 78023	$1000.00	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/31/01	Eugene Dawson, JR. 208 N. Tower Dr San Antonio, Texas 78232	$500.00	

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

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1 Total pages this Schedule A1:

2 FILER NAME: John H. Sanders

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)
01/31/01	R. Douglas Leonhard 13230 Hunters Park San Antonio, Texas 78230	$150.00	

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)
01/31/01	Dennis Rion 30940 Beck Rd Bulverde, Texas 78163	$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)
01/31/01	William Atwell 970 Isom San Antonio, Texas 78216	$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)
02/01/01	Norman Jacobson 11618 Open Meadow San Antonio, Texas 78230	$1000.00	

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)
02/01/01	K. Stephen Bonnette 227 Bluff Hollow San Antonio, Texas 78216	$100.00	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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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 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: 29

2 FILER NAME John H. Sanders

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)
02/01/01	Brice Moczygemba 2245 Blackoak Bend San Antonio, Texas 78448	$100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/01/01	John Rinehart 2037 Via Vineda San Antonio, Texas 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)
02/01/01	Ruben Cervantes 203 Rio Seco San Antonio, Texas 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)
02/01/01	William Vandertulip 16134 Old Stable Road San Antonio, Texas 78247	$100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/05/01	Sam Dawson 3802 Mill Court San Antonio, Texas 78230	$100.00	
Principal occupation (Optional)		Employer (Optional)	

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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: 1 of 1

2 FILER NAME: John H. Sanders

3 ACCOUNT # (Ethics Commission filers):

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)
02/05/01	Rick Wood 306 Hwy 46 West Boerne, Texas 78006	$100.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/07/01	Santiago Aguilar 518 Saratoga Drive San Antonio, Texas 78256	$50.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/16/01	G.W. Worth, JR. 6929 Camp Bullis Road San Antonio, Texas 78256	$1500.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/17/01	Mary Malveaux 6706 Vineland San Antonio, Texas 78239	$60.00	

Principal occupation (Optional):
Employer (Optional):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/17/01	Juanita Jackson 2502 Babcock Rd Apt 1405 San Antonio, Texas 78229	$25.00	

Principal occupation (Optional):
Employer (Optional):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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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)

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1 Total pages this Schedule A1:

2 FILER NAME John H. Sanders

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)
2/17/01	Abram Emerson 1351 Onslow San Antonio, Texas 78202	$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)
02/17/01	Dr. Levi Jacksons III 7914 RayBon Dr Apt. 1508 San Antonio, Texas 78218	$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)
02/17/01	Audrey Mosley 114 Hub Ave. San Antonio, Texas 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)
02/17/01	Josephine Watts 280 Balboa Universal City, Texas 78148	$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)
02/22/01	Maurice Heam 8700 Kentsdale San Antonio, Texas 78239	$50.00	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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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)

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1 Total pages this Schedule A1:

2 FILER NAME John H. Sanders

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)
02/26/01	Bill Kaufman 230 Country Lane San Antonio, Texas 78209	$1000.00	
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)
03/02/01	Thomas Richard Rademacher 14007 Bluff Manor Drive San Antonio, Texas 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)
03/08/01	David L. Earl 111 Soledad Ste. 11 San Antonio, Texas 78205	$1000.00	
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)
03/08/01	GSABA - SABPAC 8925 IH-10 West San Antonio, Texas 78230	$1000.00	
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)
03/10/01	Theodore Williams 13154 Virginia San Antonio, Texas 78203	$40.00	
Principal occupation (Optional)		Employer (Optional)	

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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)

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2 FILER NAME: John A. Sanders

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)
03/10/01	Ruben Archield, JR. 11501 Braesview 32502 San Antonio, Texas 78213	$35.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/12/01	Kenneth Brown 1249 Wilshire San Antonio, Texas 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)
03/14/01	A. M. Rimkus Rt. 1 Box 38 Knippa, Texas 78870	$200.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/15/01	S.A. Police Officers Assoc. PAC 1939 NE. Loop 410 #230 San Antonio, Texas 78217	$5000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/17/01	Henry Munoz III 235 W. Kings Hwy San Antonio, Texas 78212	$1000.00	
Principal occupation (Optional)		Employer (Optional)	

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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: John H. Sanders

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)
03/18/01	Carole Chamberlain 5450 Rowley Road #404 San Antonio, Texas 78248	$150.00	

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)
03/21/01	Stone City Associations, Inc. 13300 Old Blanco Rd #283 San Antonio, Texas 78216	$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)

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)

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)

Principal occupation (Optional)	Employer (Optional)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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 Schedule F:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/6/01	San Antonio Register P.O. Box 1598 San Antonio, Texas 78296	$375.00

8 Purpose of payment (See instructions regarding type of information required.): Newspaper 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 ($)
2/7/01	Petroleum Club c/o Martha Man 1335 N.E. Loop 410 San Antonio, Texas 78209	$254.15

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

•• 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 ($)
2/9/01	3-D Screen Printing 8025 2nd Street Somerset, Texas 78609	$2000.00

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

•• 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 ($)
2/9/01	Crumrine Printers, Inc. 2030 E. Houston, Street San Antonio, Texas 78202	$268.54

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

•• 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:

2 FILER NAME John. H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/9/01	Election Support Services 4958 Military Drive San Antonio, Texas 78242	$1,111.20

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

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 ($)
2/9/01	Southwestern Bell Telephone P.O. Box 4844 Houston, Texas	$1035.00

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

•• 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 ($)
2/9/01	T+M Printing Company 1316 Austin Street San Antonio, Texas 78208	$185.54

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

•• 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 ($)
2/11/01	Proforma Sweet Promotions P.O. Box 201195 San Antonio, Texas 78220	$1035.84

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

•• 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:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/12/01	Kinko's 1275 NE. Loop 410 San Antonio, Texas 78209	$342.70

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

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 ($)
2/12/01	Laura Thompson Agency 3206 Cripple Creek #8 San Antonio, Texas 78209	$268.50

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

•• 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 ($)
2/12/01	UPS Hackberry Station San Antonio, Texas 78210	$102.00

Purpose of payment (See instructions regarding type of information required.): 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 ($)
2/14/01	Amois Specialty, Inc 710 S. Flores San Antonio, Texas 78204	$45.17

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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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/14/01	Laura Thompson Agency 3206 Cripple Creek #8 San Antonio, Texas 78209	$312.00

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

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 ($)
2/14/01	UPS Beacon Hill Station San Antonio, Texas 78201	$6.80

Purpose of payment (See instructions regarding type of information required.): 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 ($)
2/14/01	Toudouze Market 800 Buena Vista San Antonio, Texas 78207	$101.52

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 ($)
2/16/01	Election Support Services 4958 Military Drive West San Antonio, Texas 78242	$90.29

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

•• 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:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/17/01	N'Awlins Creole Kitchen 2351 E. Commerce San Antonio, Texas 78205	$350.00

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

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 ($)
2/17/01	A Dream Weaver 1800 N. New Braunfels Ave. San Antonio, Texas 78208	$196.00

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

•• 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 ($)
2/17/01	Election Support Services 4958 Military Drive West San Antonio, Texas 78242	$310.00

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

•• 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 ($)
2/17/01	Office Depo 8510 Four Winds Drive Windcrest, Texas 78239	$331.43

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

•• 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:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/19/01	Election Support Services 4958 Military Drive West San Antonio, Texas 78242	$29.13

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

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 ($)
2/21/01	3-D Screen Printing 8025 2nd Street Somerset, Texas 78069	$625.00

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

•• 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 ($)
2/21/01	Crumrine Printers Inc. 2030 E. Houston St San Antonio, Texas 78202	$75.00

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

•• 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 ($)
2/23/01	City of San Antonio P.O. Box 839975 San Antonio, Texas 78283	$69.04

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

•• 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:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/27/01	Laura Thompson Agency 3206 Cripple Creek #8 San Antonio, Texas 78209	$910.02

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

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 ($)
2/27/01	Office Depo 8510 Four Winds Drive Windcrest, Texas 78239	$187.26

Purpose of payment (See instructions regarding type of information required.): 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 ($)
3/10/01	James Turner 2233 S.E. Military Drive Ste. 1 San Antonio, Texas 78223	$350.00

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

•• 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 ($)
3/13/01	David Arevalo 831 S. Hackberry Street San Antonio, Texas 78203	$1000.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/14/01	Sprint PCS 613 N.W. Loop 410 San Antonio, Texas 78269	$170.00

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

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 ($)
3/20/01	City of San Antonio P.O. Box 839975 San Antonio, Texas 78283	$100.00

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

•• 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 ($)
3/20/01	James Turner 2233 S.E. Military Drive Ste 1 San Antonio, Texas 78223	$200.00

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

•• 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 ($)
3/20/01	Laura Thompson Agency 3206 Cripple Creek #8 San Antonio, Texas 78209	$1277.50

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/20/01	Laura Thompson Agency 3204 Cripple Creek #8 San Antonio, Texas 78209	$2288.00

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

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 ($)
3/20/01	Proforma Sweet Promotions P.O. Box 201195 San Antonio, Texas 78220	$73.44

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

•• 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 ($)
3/24/01	City Of San Antonio P.O. Box 839975 San Antonio, Texas 78283	$100.00

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

•• 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 ($)
3/24/01	James Turner 2233 S.E. Military Drive, Ste 1 San Antonio, Texas 78223	$40.99

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME John H. Sanders

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/24/01	Laura Thompson Agency 3206 Cripple Creek #8 San Antonio, Texas 78209	$717.39

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

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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