

# Verification Dunnam Home Lies in HD 56



Who Represents Me?  
Districts By Address

Find District Member Information District Information

About Contact

U.S. Senators | U.S. Representatives | State Senators | State Representatives

212 Shady Trl  
McGregor, TX  
76657-3792  
McLennan County

Texas U.S. Senators

U.S. Senators represent the entire state. Texas' current U.S. Senators are Senator John Cornyn and Senator Kay Bailey Hutchison. See their websites for current contact information.

Texas U.S. Representative

Congressional District 17—Congressman Chet Edwards  
Texas Congressional Member Websites

Texas State Senator

Senate District 22—Senator Brian Birdwell  
Capitol Office: EXT E1.606  
Capitol Phone: (512) 463-0122  
Capitol Address: P.O. Box 12068, Capitol Station  
Austin, TX 78711  
District Address: 900 Austin Ave, Suite 403  
Waco TX 76701  
Phone: (254) 772-6225  
State District Offices

Texas State Representative

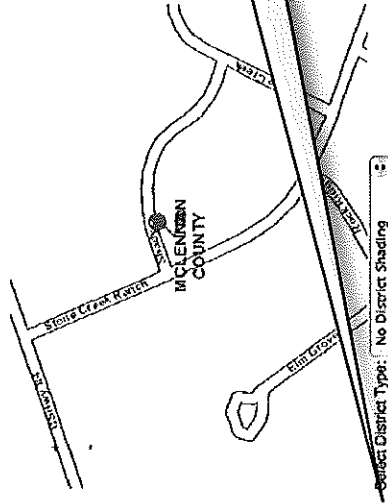
House District 56—Representative Charles 'Doc' Anderson  
Capitol Office: EXT E1.510  
Capitol Phone: (512) 463-0135  
Capitol Address: P.O. Box 2910  
Austin, TX 78768  
District Address: 900 Austin Avenue, Suite 604  
Waco TX 76701  
Phone: (254) 754-3892

Texas State Board of Education Member

SBOE District 14—Mrs. Gail Lowe  
State Board of Education Member Websites

Dunnam Residence:  
212 Shady Trl  
McGregor, TX  
76657-3792  
McLennan County

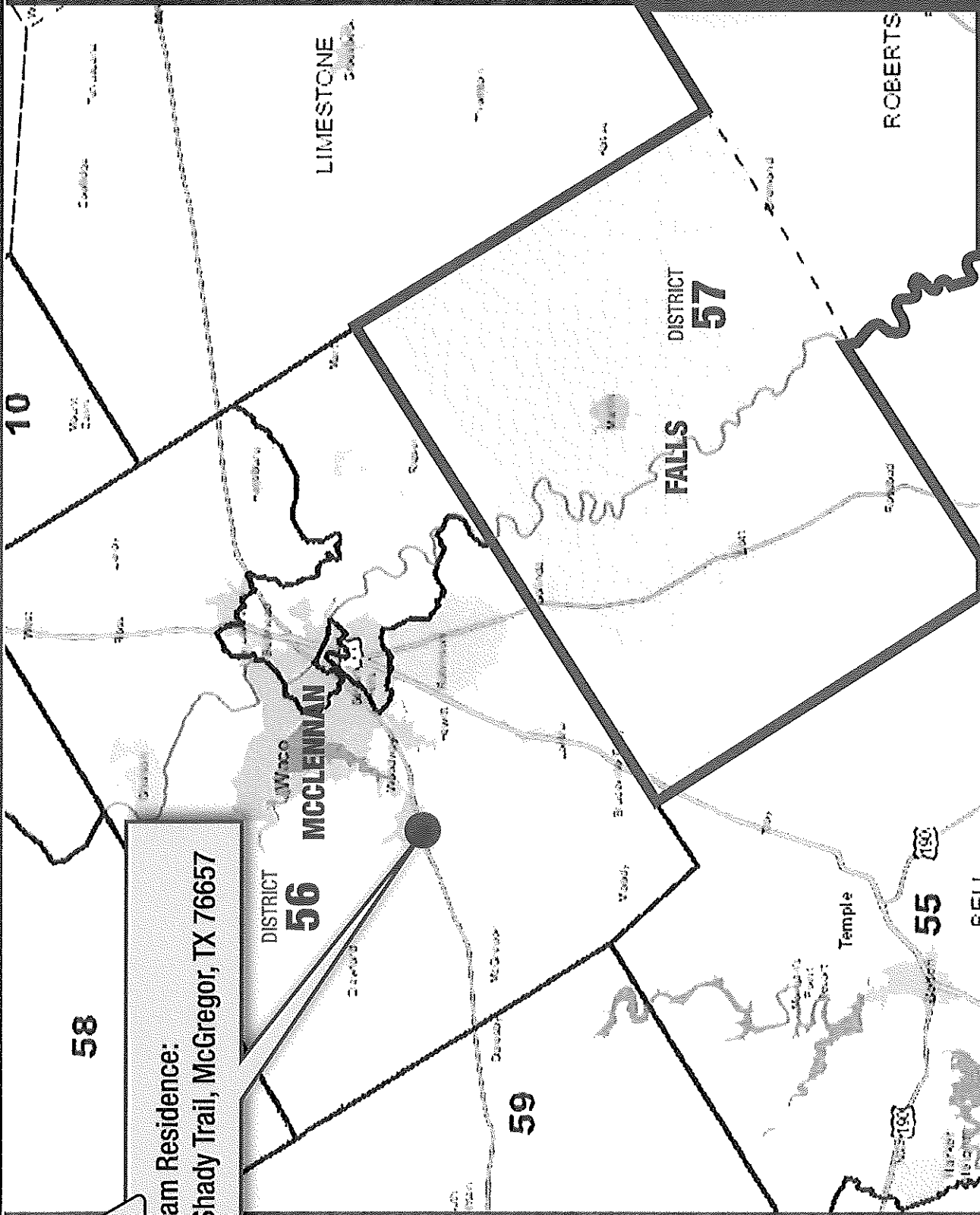
House District 56 —  
Representative Charles  
'Doc' Anderson



# Dunnam Resides Outside of District 57



Dunnam Residence:  
212 Shady Trail, McGregor, TX 76657



# Dunnam's Lies Regarding His Residency

## THE LIE:

He Would Like You To Believe He Lives Here:  
307 CR 499A, Chilton TX  
**DISTRICT 57**



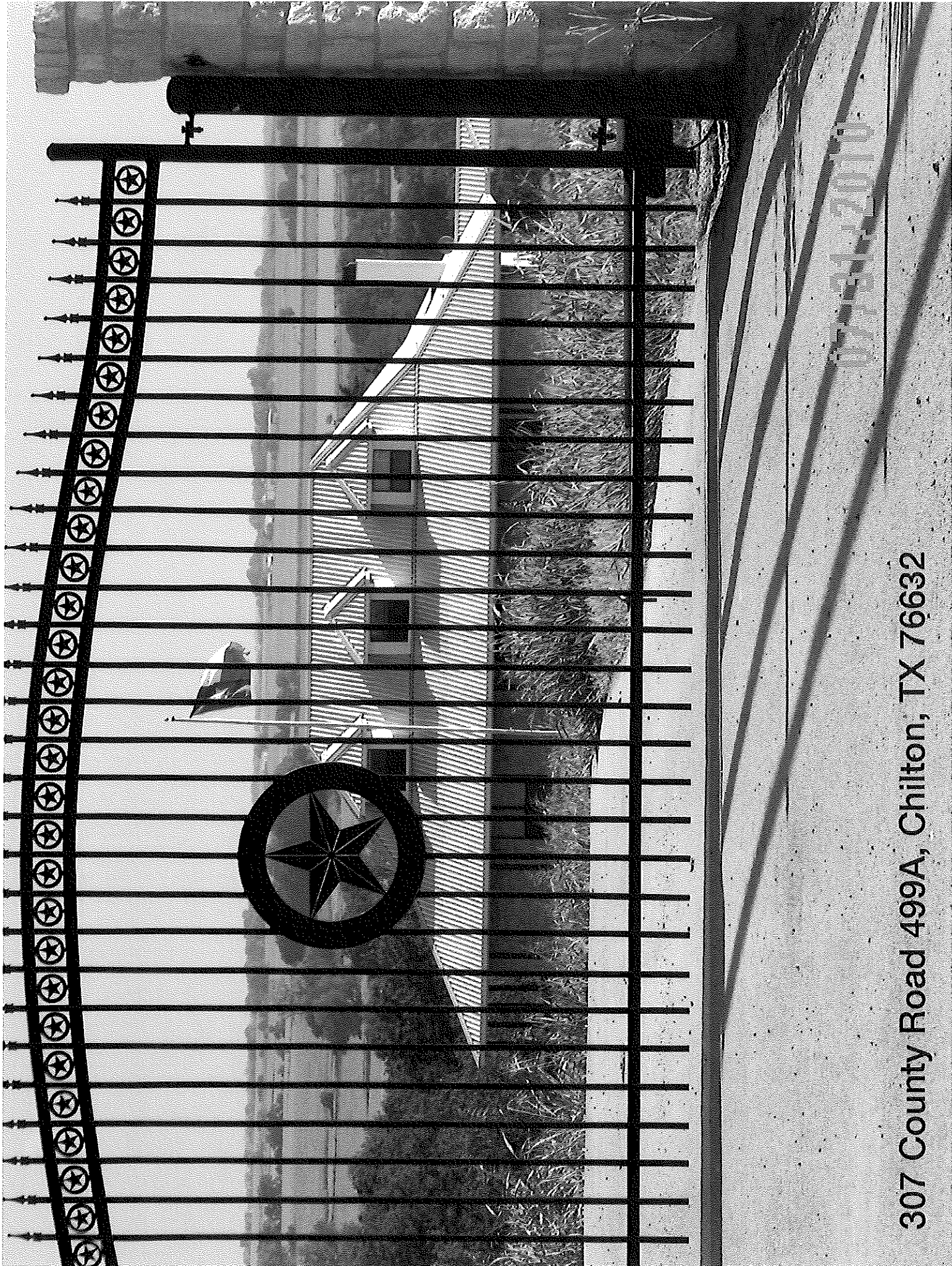
- Overgrown grass, unmaintained landscaping
- No activity in and out of house
- No cars in driveway

## THE TRUTH:

When He and His Family Actually Live Here:  
212 Shady Trail, McGregor, TX  
**DISTRICT 56**



- Well-maintained landscaping, mowed and manicured
- Activity in and out of house
- Cars bearing SO plates in driveway

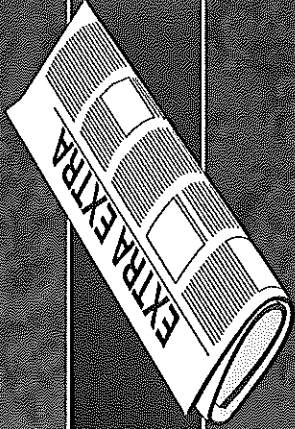


307 County Road 499A, Chilton, TX 76632



07-18-2010

212 Shady Trail, McGregor, TX 76657



# Waco Tribune-Herald

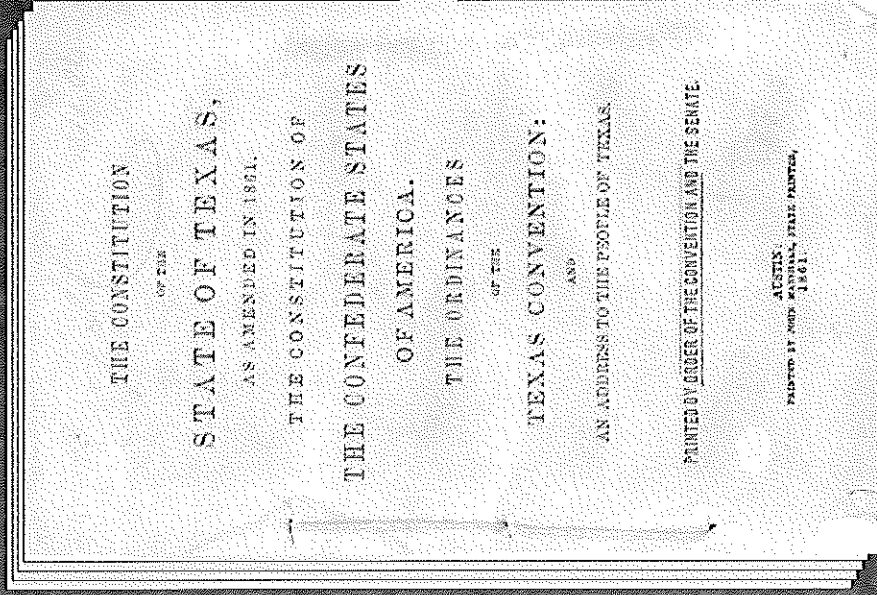
118 years serving the Heart of Texas

...He said he is selling his house in the Stone Creek Ranch subdivision but didn't want to uproot his kids from school until it was absolutely necessary.

**“That is my residence. I stay there,” Dunnam said. “Until we sell our house, we are not going to disrupt our children’s education. I wouldn’t vote for anyone who would do that.”**

— Waco Tribune-Herald, November 15, 2002

# Dunnam Candidacy Violates the Texas Constitution



## Article 3

### Sec. 7. QUALIFICATIONS OF REPRESENTATIVES.

No person shall be a Representative, unless he be a citizen of the United States, and, at the time of his election, a qualified voter of this State, and shall have been a resident of this State two years next preceding his election, the last year thereof a resident of the district for which he shall be chosen, and shall have attained the age of twenty-one years.

# WACO TRIBUNE-HERALD

## **Hibbs sues over Dunnam residency; Ex-opponent alleges Democrat's home not in District 57**

By TOMMY WITHERSPOON  
November 15, 2002

Vanquished Republican candidate Jeffrey Hibbs is asking a Leon County judge to block state Rep. Jim Dunnam from being sworn in for a new term, alleging that Dunnam does not live in District 57.

Hibbs, a 23-year-old Baylor University graduate student who opposed Dunnam for re-election, filed suit against Dunnam this week in 12<sup>th</sup> State District Court in Centerville. The suit seeks to prohibit Gov. Rick Perry and Secretary of State Gwyn Shea from issuing a certificate of election to Dunnam and asks for a declaration that Dunnam is not eligible to serve because he does not live in his district.

Hibbs claims in his suit that Dunnam's contention that he has established residence at 2710 Pine Ave. in Waco is a "sham and a fraud."

No hearing date had been set Thursday on Hibbs' request for a temporary restraining order.

Dunnam, an attorney and six-year incumbent, took just more than 60 percent of the vote to beat Hibbs. He called the lawsuit "frivolous" and an "irresponsible act by a sore loser."

"Mr. Hibbs' lawsuit has no chance of success on the merits and is merely a waste of our court's time, taxpayer money and a delay of the democratic process," Dunnam said. "The irony of a tort reform candidate bringing such a frivolous lawsuit cannot go unnoticed."

Hibbs raised the issue of Dunnam's residency a few weeks before the November general election. However, at the time, he didn't charge that Dunnam was in violation of the Texas Election Code, as his lawsuit does.

When District 57 was redrawn last year, it retained parts of Waco, Bellmead and Lacy-Lakeview. But other McLennan County towns were replaced with Leon, Falls, Madison and Robertson counties.

The new district lines cut Dunnam out of his own district and put his home near McGregor in McLennan County's other seat, District 56. Instead of staying in the Republican-laden District 56, Dunnam says he established his residency on Pine Street in Waco so he could run in District 57, which is more amenable to Democrats.



Dunnam's attorney, Roy Barrett of Waco, said Hibbs' lawsuit is "totally without merit."

"Mr. Dunnam is legally a resident of the state representative district from which he was elected," Barrett said. "Also, this lawsuit attempts to challenge an election after the election occurred and simply comes too late. All challenges to a candidate's residency made in court must be made before the election."

Hibbs' attorney, Mary Pearson of Temple, said she filed the lawsuit in Leon County because the suit is required to be filed in a court within the boundaries of District 57. She would not specify why she chose Leon County.

"Some questions have arisen regarding Mr. Dunnam's ability to sit in this position and represent the citizens of District 57, and those need to be resolved before he is sworn into office," she said. "The goal of Jeffrey Hibbs is not to do something against Jim Dunnam as a person. It is just to make sure that someone is representing the citizens of District 57 who is legally eligible to do so."

The suit says that Dunnam, his wife and three children have lived near McGregor since 1998 and that his children continue to go to Midway schools. The suit claims that people living near the Pine Avenue address have said Dunnam has "never been observed to live there, that he had not been observed coming or going from that address, and that an old car has been abandoned in the driveway in order to appear that someone lives there, but the car is not moved."

Dunnam, set to be sworn in Jan. 14, said he clearly has established his homestead within District 57, well within the requirements of state law. He said he is selling his house in the Stone Creek Ranch subdivision but didn't want to uproot his kids from school until it was absolutely necessary.

"That is my residence. I stay there," Dunnam said. "Until we sell our house, we are not going to disrupt our children's education. I wouldn't vote for anyone who would do that."

A candidate can establish residency by living in his district or intending to move there, according to state election laws.

Dunnam said he hopes the "Republican leadership" in Austin is not behind Hibbs' lawsuit, which he says is "trying to subvert the democratic process and overturn the voters' real choice."

"I hope that there is not really a larger motive here, right at a time when I am getting calls about possibly serving as chairman of the House Democratic Caucus," Dunnam said. "I hope the Republican leadership is not trying to silence what is a pretty strong voice in Austin."

Tommy Witherspoon can be reached at 757-5737 or at <<mailto:twitherspoon@wacotrib.com>>

**Property Search Results > 141955 DUNNAM JAMES R for Year 2010**

[New Search](#)

[Details](#) [Map](#)

Click on a title bar to expand or collapse the information.

[Collapse All](#)

**▼ Property**

**Account**

Property ID: 141955      Legal Description: STONE CREEK RANCH Block 2 Lot 4  
 Geographic ID: 360824000002043      Agent Code:  
 Type: Real

**Location**

Address: 212 SHADY TRL      Mapsco: 326  
 TX  
 Neighborhood: RES STONE CREEK RANCH Map ID: 75C  
 Neighborhood CD: 36149.0

**Owner**

Name: DUNNAM JAMES R      Owner ID: 28268  
 Mailing Address: 4125 W WACO DR      % Ownership: 100.0000000000%  
 WACO, TX 76710-7110

Exemptions:

**▼ Values**

|                                       |   |           |                       |
|---------------------------------------|---|-----------|-----------------------|
| (+) Improvement Homesite Value:       | + | \$356,927 |                       |
| (+) Improvement Non-Homesite Value:   | + | \$0       |                       |
| (+) Land Homesite Value:              | + | \$40,000  |                       |
| (+) Land Non-Homesite Value:          | + | \$0       | Ag / Timber Use Value |
| (+) Agricultural Market Valuation:    | + | \$0       | \$0                   |
| (+) Timber Market Valuation:          | + | \$0       | \$0                   |
| -----                                 |   |           |                       |
| (=) Market Value:                     | = | \$396,927 |                       |
| (-) Ag or Timber Use Value Reduction: | - | \$0       |                       |
| -----                                 |   |           |                       |
| (=) Appraised Value:                  | = | \$396,927 |                       |
| (-) HS Cap:                           | - | \$0       |                       |
| -----                                 |   |           |                       |
| (=) Assessed Value:                   | = | \$396,927 |                       |

**▼ Taxing Jurisdiction**

Owner: DUNNAM JAMES R  
 % Ownership: 100.0000000000%  
 Total Value: \$396,927

| Entity          | Description                    | Tax Rate | Appraised Value | Taxable Value               | Estimated Tax |
|-----------------|--------------------------------|----------|-----------------|-----------------------------|---------------|
| 00              | McLENNAN COUNTY                | 0.443100 | \$396,927       | \$396,927                   | \$1,758.78    |
| 08              | McLENNAN COUNTY FARM TO MARKET | 0.021600 | \$396,927       | \$396,927                   | \$85.74       |
| 36              | MIDWAY ISD                     | 1.320000 | \$396,927       | \$396,927                   | \$5,239.44    |
| 80              | WACO, CITY OF                  | 0.786232 | \$396,927       | \$396,927                   | \$3,120.77    |
| 86              | McLENNAN COMMUNITY COLLEGE     | 0.156332 | \$396,927       | \$396,927                   | \$620.52      |
| CAD             | McLENNAN CAD                   | 0.000000 | \$396,927       | \$396,927                   | \$0.00        |
| Total Tax Rate: |                                | 2.727264 |                 |                             |               |
|                 |                                |          |                 | Taxes w/Current Exemptions: | \$10,825.25   |
|                 |                                |          |                 | Taxes w/o Exemptions:       | \$10,825.25   |

**▼ Improvement / Building**

| Improvement #1: | Residential | State Code:            | A1       | Living Area:  | 3984.5 sqft | Value: | \$356,927 |
|-----------------|-------------|------------------------|----------|---------------|-------------|--------|-----------|
|                 | Type        | Description            | Class CD | Exterior Wall | Year Built  | SQFT   |           |
| →               | MA1         | Main Area 1            | 11WV6    |               | 1998        | 2680.5 |           |
| →               | MA2         | Main Area 2            | 11SEC    |               | 1998        | 1304.0 |           |
| →               | 041         | Attached Garage 1st Fl | GRA      |               | 1998        | 737.0  |           |
| →               | 011         | Open Porch 1st Fl      | PO       |               | 1998        | 99.0   |           |

|     |                            |       |      |        |
|-----|----------------------------|-------|------|--------|
| 011 | Open Porch 1st Fl          | PO    | 1998 | 132.5  |
| 411 | Drwy-Concrete Special Unit | RCON  | 1998 | 1560.0 |
| 522 | Bathroom Ave               | BATHA | 1998 | 5.0    |
| 417 | Fence                      | EXCP  | 1998 | 1.0    |
| 449 | Swimming Pool Jacuzzi      | EXCP  | 2007 | 1.0    |

▼ Land

| # | Type | Description | Acres  | Sqft | Eff Front | Eff Depth | Market Value | Prod. Value |
|---|------|-------------|--------|------|-----------|-----------|--------------|-------------|
| 1 | RES  | Residual    | 0.0000 | 0.00 | 0.00      | 0.00      | \$40,000     | \$0         |

▼ Roll Value History

| Year | Improvements | Land Market | Ag Valuation | Appraised | HS Cap  | Assessed |
|------|--------------|-------------|--------------|-----------|---------|----------|
| 2011 | N/A          | N/A         | N/A          | N/A       | N/A     | N/A      |
| 2010 | \$356,927    | \$40,000    |              | 0         | 396,927 | \$0      |
| 2009 | \$344,506    | \$40,000    |              | 0         | 384,506 | \$0      |
| 2008 | \$344,506    | \$40,000    |              | 0         | 384,506 | \$0      |
| 2007 | \$299,493    | \$40,000    |              | 0         | 339,493 | \$0      |
| 2006 | \$299,493    | \$40,000    |              | 0         | 339,493 | \$0      |
| 2005 | \$299,493    | \$40,000    |              | 0         | 339,493 | \$0      |
| 2004 | \$292,862    | \$40,000    |              | 0         | 332,862 | \$0      |
| 2003 | \$274,158    | \$40,000    |              | 0         | 314,158 | \$0      |
| 2002 | \$274,158    | \$40,000    |              | 0         | 314,158 | \$0      |
| 2001 | \$265,597    | \$40,000    |              | 0         | 305,597 | \$4,578  |
| 2000 | \$269,675    | \$40,000    |              | 0         | 309,675 | \$36,021 |

▼ Deed History - (Last 3 Deed Transactions)

| # | Deed Date             | Type | Description     | Grantor | Grantee        | Volume | Page |
|---|-----------------------|------|-----------------|---------|----------------|--------|------|
| 1 | 6/11/1997 12:00:00 AM | OT   | "Not in Use" OT |         | DUNNAM JAMES R | 152    | 358  |

Questions Please Call (254) 752-9864 (254) 752-9864

# Falls County Central Appraisal District

Chief Appraiser - Allen McKinley



Official Website  
Hosted By Pritchard & Abbott, Inc.



[New Property Search](#)

[Go To Previous Page](#)

Property ID:

Account / Geo Number:

Property Legal Description:

Survey/Sub Division Abstract:

Block:

Property Location:

Section / Lot:

Owner Information:

[View Building Detail Information](#)

[View Land Detail Information](#)

Previous Owner:

Deed Information:

Volume:

Page:

File Number:

Deed Date:

[View Previous Owner Information](#)

Property Detail:

Property Exempt:

Category/SPTB Code:

Total Acres:

Total Living Sqft:

Owner Interest:

Homestead Exemption:

Homestead Cap Value:

Land Ag/Timber Value:

Land Market Value:

Improvement Value:

Property Market Value:

[Printer Friendly Page](#)

Click the button above for a printable version of this record with all available details

[Homestead Form](#)

| Jur Code | Description      | Market Value | Homestead | Total Exemption | Taxable |
|----------|------------------|--------------|-----------|-----------------|---------|
| AD       | FALLS COUNTY CAD | 263,950      | HOMESTEAD | 0               | 263,950 |
| CF       | FALLS COUNTY     | 263,950      | HOMESTEAD | 0               | 263,950 |
| RD       | LATERAL ROAD     | 263,950      | HOMESTEAD | 3,000           | 260,950 |
| SC       | CHILTON ISD      | 263,950      | HOMESTEAD | 15,000          | 248,950 |
| F2       | EMER SVCS DIST 2 | 263,950      | HOMESTEAD | 0               | 263,950 |

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Real Estate Appraisal Information is the 2010 CERTIFIED Appraisal Values. © FALLS COUNTY APPRAISAL DISTRICT | Last Data Update: 07/23/2010

# PERSONAL FINANCIAL STATEMENT

## FORM PFS COVER SHEET

Filed in accordance with chapter 572 of the Government Code.  
For filings required in 2010, covering calendar year ending December 31, 2009.  
Use FORM PFS--INSTRUCTION GUIDE when completing this form. ✓

TOTAL NUMBER OF PAGES FILED:

33

ACCOUNT #

00019900 ✓

1 NAME

TITLE; FIRST; MI

James R.

NICKNAME; LAST; SUFFIX

Jim Dunnam

### OFFICE USE ONLY

Date Received

RECEIVED

FEB 19 2010

Texas Ethics Commission

2/16

Receipt #

HD / PM

Amount

PROCESSED

FEB 19 2010

Date Imaged

2 ADDRESS

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

4125 W. Waco Drive  
Waco, Texas 76710 (office)

(CHECK IF FILER'S HOME ADDRESS)

3 TELEPHONE NUMBER

AREA CODE

PHONE NUMBER; EXTENSION

( 254 ) 753-6437 (office)

4 REASON FOR FILING STATEMENT

- CANDIDATE \_\_\_\_\_ (INDICATE OFFICE)
- ELECTED OFFICER State Representative, District 57 (INDICATE OFFICE)
- APPOINTED OFFICER \_\_\_\_\_ (INDICATE AGENCY)
- EXECUTIVE HEAD \_\_\_\_\_ (INDICATE AGENCY)
- FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT
- STATE PARTY CHAIR \_\_\_\_\_ (INDICATE PARTY)
- OTHER \_\_\_\_\_ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity):

SPOUSE Michelle Dunnam

DEPENDENT CHILD 1. Lauren Dunnam

2. Mason Dunnam

3. Rachel Dunnam

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

33

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

R-443886

# SOURCES OF OCCUPATIONAL INCOME

## PART 1A

NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |  |
|--|--|
| <b>1</b> INFORMATION RELATES TO  | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input checked="" type="checkbox"/> DEPENDENT CHILD <u>  1  </u>  |
| <b>2</b> EMPLOYMENT<br><br><input checked="" type="checkbox"/> EMPLOYED BY ANOTHER | NAME AND ADDRESS OF EMPLOYER / POSITION HELD<br><input type="checkbox"/> (Check If Filer's Home Address)<br><br>Ridgewood Country Club<br>7301 Fish Pond Road<br>Waco, Texas 76710 |
| <input type="checkbox"/> SELF-EMPLOYED   | NATURE OF OCCUPATION<br><br>Lifeguard  |
| INFORMATION RELATES TO   | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| EMPLOYMENT<br><br><input type="checkbox"/> EMPLOYED BY ANOTHER                     | NAME AND ADDRESS OF EMPLOYER / POSITION HELD<br><input type="checkbox"/> (Check If Filer's Home Address )  |
| <input type="checkbox"/> SELF-EMPLOYED   | NATURE OF OCCUPATION   |
| INFORMATION RELATES TO   | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| EMPLOYMENT<br><br><input type="checkbox"/> EMPLOYED BY ANOTHER                     | NAME AND ADDRESS OF EMPLOYER / POSITION HELD<br><input type="checkbox"/> (Check If Filer's Home Address)   |
| <input type="checkbox"/> SELF-EMPLOYED   | NATURE OF OCCUPATION   |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# STOCK

## PART 2

NOT APPLICABLE

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |  |  |  |   |   |
|--|--|--|--|---|---|
| <sup>1</sup> BUSINESS ENTITY           | LIFE PARTNERS HLDGS INC                      |  |  |   | NAME  |
| <sup>2</sup> STOCK HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER    | <input type="checkbox"/> SPOUSE                    | <input type="checkbox"/> DEPENDENT CHILD _____ |   |   |
| <sup>3</sup> NUMBER OF SHARES          | <input type="checkbox"/> LESS THAN 100       | <input type="checkbox"/> 100 TO 499                | <input type="checkbox"/> 500 TO 999            | <input type="checkbox"/> 1,000 TO 4,999     |   |
|  | <input type="checkbox"/> 5,000 TO 9,999      | <input checked="" type="checkbox"/> 10,000 OR MORE |  |   |   |
| <sup>4</sup> IF SOLD                   | <input checked="" type="checkbox"/> NET GAIN | <input type="checkbox"/> LESS THAN \$5,000         | <input type="checkbox"/> \$5,000--\$9,999      | <input type="checkbox"/> \$10,000--\$24,999 | <input checked="" type="checkbox"/> \$25,000--OR MORE |
|  | <input type="checkbox"/> NET LOSS            |  |  |   |   |
| BUSINESS ENTITY                        | NAME   |  |  |   |   |
| STOCK HELD OR ACQUIRED BY              | <input type="checkbox"/> FILER               | <input type="checkbox"/> SPOUSE                    | <input type="checkbox"/> DEPENDENT CHILD _____ |   |   |
| NUMBER OF SHARES                       | <input type="checkbox"/> LESS THAN 100       | <input type="checkbox"/> 100 TO 499                | <input type="checkbox"/> 500 TO 999            | <input type="checkbox"/> 1,000 TO 4,999     |   |
|  | <input type="checkbox"/> 5,000 TO 9,999      | <input type="checkbox"/> 10,000 OR MORE            |  |   |   |
| IF SOLD                                | <input type="checkbox"/> NET GAIN            | <input type="checkbox"/> LESS THAN \$5,000         | <input type="checkbox"/> \$5,000--\$9,999      | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE            |
|  | <input type="checkbox"/> NET LOSS            |  |  |   |   |
| BUSINESS ENTITY                        | NAME   |  |  |   |   |
| STOCK HELD OR ACQUIRED BY              | <input type="checkbox"/> FILER               | <input type="checkbox"/> SPOUSE                    | <input type="checkbox"/> DEPENDENT CHILD _____ |   |   |
| NUMBER OF SHARES                       | <input type="checkbox"/> LESS THAN 100       | <input type="checkbox"/> 100 TO 499                | <input type="checkbox"/> 500 TO 999            | <input type="checkbox"/> 1,000 TO 4,999     |   |
|  | <input type="checkbox"/> 5,000 TO 9,999      | <input type="checkbox"/> 10,000 OR MORE            |  |   |   |
| IF SOLD                                | <input type="checkbox"/> NET GAIN            | <input type="checkbox"/> LESS THAN \$5,000         | <input type="checkbox"/> \$5,000--\$9,999      | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE            |
|  | <input type="checkbox"/> NET LOSS            |  |  |   |   |
| BUSINESS ENTITY                        | NAME   |  |  |   |   |
| STOCK HELD OR ACQUIRED BY              | <input type="checkbox"/> FILER               | <input type="checkbox"/> SPOUSE                    | <input type="checkbox"/> DEPENDENT CHILD _____ |   |   |
| NUMBER OF SHARES                       | <input type="checkbox"/> LESS THAN 100       | <input type="checkbox"/> 100 TO 499                | <input type="checkbox"/> 500 TO 999            | <input type="checkbox"/> 1,000 TO 4,999     |   |
|  | <input type="checkbox"/> 5,000 TO 9,999      | <input type="checkbox"/> 10,000 OR MORE            |  |   |   |
| IF SOLD                                | <input type="checkbox"/> NET GAIN            | <input type="checkbox"/> LESS THAN \$5,000         | <input type="checkbox"/> \$5,000--\$9,999      | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE            |
|  | <input type="checkbox"/> NET LOSS            |  |  |   |   |
| BUSINESS ENTITY                        | NAME   |  |  |   |   |
| STOCK HELD OR ACQUIRED BY              | <input type="checkbox"/> FILER               | <input type="checkbox"/> SPOUSE                    | <input type="checkbox"/> DEPENDENT CHILD _____ |   |   |
| NUMBER OF SHARES                       | <input type="checkbox"/> LESS THAN 100       | <input type="checkbox"/> 100 TO 499                | <input type="checkbox"/> 500 TO 999            | <input type="checkbox"/> 1,000 TO 4,999     |   |
|  | <input type="checkbox"/> 5,000 TO 9,999      | <input type="checkbox"/> 10,000 OR MORE            |  |   |   |
| IF SOLD                                | <input type="checkbox"/> NET GAIN            | <input type="checkbox"/> LESS THAN \$5,000         | <input type="checkbox"/> \$5,000--\$9,999      | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE            |
|  | <input type="checkbox"/> NET LOSS            |  |  |   |   |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY



# MUTUAL FUNDS

## PART 4

NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |  |
|--|--|
| 1 MUTUAL FUND  | NAME   |
|  | CAPITAL WORLD GROWTH & INCOME FD INC CLASS A   |
| 2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY                                      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| 3 NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| 4 IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |

|  |  |
|--|--|
| MUTUAL FUND  | NAME   |
|  | GROWTH FUND AMERICA CL A   |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY                                      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |

|  |  |
|--|--|
| MUTUAL FUND  | NAME   |
|  | INVESTMENT CO AMERICA CLAS A   |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY                                      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

**MUTUAL FUNDS****PART 4** NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |  |
|--|--|
| 1 MUTUAL FUND  | NAME<br>WASH MUTL INVS FD INC CLASS A  |
| 2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY                                      | <input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| 3 NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| 4 IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |
| MUTUAL FUND  | NAME<br>AMERICAN FUNDS CAP INC BLDR 529 CL A   |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS   | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |
| MUTUAL FUND  | NAME<br>GROWTH FD OF AMERICA INC CL 529-A  |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| NUMBER OF SHARES OF MUTUAL FUND  | <input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999<br><input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE |
| IF SOLD <input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS   | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE  |
| <b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>                             |  |

# INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

## PART 5

NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|                              |   |
|------------------------------|---|
| <b>1</b><br>SOURCE OF INCOME | NAME AND ADDRESS<br>DUNNAM & DUNNAM, L.L.P.<br>4125 W. Waco Drive<br>Waco, Texas 76710  |
| <b>2</b><br>RECEIVED BY      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| <b>3</b><br>AMOUNT           | <input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |

|                  |   |
|------------------|---|
| SOURCE OF INCOME | NAME AND ADDRESS<br>LIFE PARTNERS HLDGS INC   |
| RECEIVED BY      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| AMOUNT           | <input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |

|                  |   |
|------------------|---|
| SOURCE OF INCOME | NAME AND ADDRESS<br>LIFE PARTNERS HLDGS INC   |
| RECEIVED BY      | <input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| AMOUNT           | <input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

## PART 5

NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|                              |   |
|------------------------------|---|
| <b>1</b><br>SOURCE OF INCOME | NAME AND ADDRESS<br>XTO ENERGY, INC.<br>810 Houston Street<br>Fort Worth, Texas 76102   |
| <b>2</b><br>RECEIVED BY      | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| <b>3</b><br>AMOUNT           | <input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
| SOURCE OF INCOME             | NAME AND ADDRESS  |
| RECEIVED BY                  | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| AMOUNT                       | <input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE            |
| SOURCE OF INCOME             | NAME AND ADDRESS  |
| RECEIVED BY                  | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| AMOUNT                       | <input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE            |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# PERSONAL NOTES AND LEASE AGREEMENTS

## PART 6

NOT APPLICABLE

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability or more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |   |
|--|---|
| <sup>1</sup> PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Central National Bank   |
| <sup>2</sup> LIABILITY OF  | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| <sup>3</sup> GUARANTOR   |   |
| <sup>4</sup> AMOUNT  | <input type="checkbox"/> \$1,000-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input checked="" type="checkbox"/> \$25,000-OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT              | Vance Dunnam  |
| LIABILITY OF   | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| GUARANTOR  |   |
| AMOUNT   | <input type="checkbox"/> \$1,000-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input checked="" type="checkbox"/> \$25,000-OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT              |   |
| LIABILITY OF   | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| GUARANTOR  |   |
| AMOUNT   | <input type="checkbox"/> \$1,000-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE            |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# INTERESTS IN REAL PROPERTY

## PART 7A

NOT APPLICABLE

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |   |
|--|---|
| <b>1 HELD OR ACQUIRED BY</b>   | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| <b>2 STREET ADDRESS</b><br><input type="checkbox"/> NOT AVAILABLE<br><input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS      | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE<br>212 Shady Trail, McGregor, McLennan County, Texas  |
| <b>3 DESCRIPTION</b><br><input checked="" type="checkbox"/> LOTS<br><input type="checkbox"/> ACRES                               | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED<br>One Lot, home   |
| <b>4 NAMES OF PERSONS RETAINING AN INTEREST</b><br><input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) |   |
| <b>5 IF SOLD</b><br><input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS                                       | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

|  |   |
|--|---|
| <b>HELD OR ACQUIRED BY</b>   | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____  |
| <b>STREET ADDRESS</b><br><input type="checkbox"/> NOT AVAILABLE<br><input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS      | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE<br>307 County Road 499A, Chilton, Falls County, Texas 76632   |
| <b>DESCRIPTION</b><br><input type="checkbox"/> LOTS<br><input checked="" type="checkbox"/> ACRES                               | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED<br>91 Acres, home  |
| <b>NAMES OF PERSONS RETAINING AN INTEREST</b><br><input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) |   |
| <b>IF SOLD</b><br><input type="checkbox"/> NET GAIN<br><input type="checkbox"/> NET LOSS                                       | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# INTERESTS IN BUSINESS ENTITIES

## PART 7B

NOT APPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from these interests. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|   |  |
|---|--|
| <p><sup>1</sup> HELD OR ACQUIRED BY</p>   | <p><input checked="" type="checkbox"/> FILER      <input type="checkbox"/> SPOUSE      <input type="checkbox"/> DEPENDENT CHILD _____</p>  |
| <p><sup>2</sup> DESCRIPTION</p>   | <p style="text-align: right;"><small>NAME AND ADDRESS<br/><input type="checkbox"/> (Check If Filer's Home Address)</small></p> <p>DUNNAM &amp; DUNNAM, L.L.P.<br/>4125 W. Waco Drive<br/>Waco, Texas 76710</p> |
| <p><sup>3</sup> IF SOLD</p> <p><input type="checkbox"/> NET GAIN</p> <p><input type="checkbox"/> NET LOSS</p> | <p><input type="checkbox"/> LESS THAN \$5,000    <input type="checkbox"/> \$5,000--\$9,999    <input type="checkbox"/> \$10,000--\$24,999    <input type="checkbox"/> \$25,000--OR MORE</p>                    |
| <p>HELD OR ACQUIRED BY</p>  | <p><input checked="" type="checkbox"/> FILER      <input type="checkbox"/> SPOUSE      <input type="checkbox"/> DEPENDENT CHILD _____</p>  |
| <p>DESCRIPTION</p>  | <p style="text-align: right;"><small>NAME AND ADDRESS<br/><input type="checkbox"/> (Check If Filer's Home Address)</small></p> <p>DMP HOLDINGS, L.L.C<br/>4125 W. Waco Drive<br/>Waco, Texas 76710</p>         |
| <p>IF SOLD</p> <p><input type="checkbox"/> NET GAIN</p> <p><input type="checkbox"/> NET LOSS</p>              | <p><input type="checkbox"/> LESS THAN \$5,000    <input type="checkbox"/> \$5,000--\$9,999    <input type="checkbox"/> \$10,000--\$24,999    <input type="checkbox"/> \$25,000--OR MORE</p>                    |
| <p>HELD OR ACQUIRED BY</p>  | <p><input checked="" type="checkbox"/> FILER      <input type="checkbox"/> SPOUSE      <input type="checkbox"/> DEPENDENT CHILD _____</p>  |
| <p>DESCRIPTION</p>  | <p style="text-align: right;"><small>NAME AND ADDRESS<br/><input type="checkbox"/> (Check If Filer's Home Address)</small></p> <p>JOSEPH AND COMPANY<br/>8622 Cape Royal Drive<br/>Cyprus, Texas 77433</p>     |
| <p>IF SOLD</p> <p><input type="checkbox"/> NET GAIN</p> <p><input type="checkbox"/> NET LOSS</p>              | <p><input type="checkbox"/> LESS THAN \$5,000    <input type="checkbox"/> \$5,000--\$9,999    <input type="checkbox"/> \$10,000--\$24,999    <input type="checkbox"/> \$25,000--OR MORE</p>                    |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# TRUST INCOME

# PART 9

NOT APPLICABLE

Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received *more than \$500* in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|  |   |
|--|---|
| <sup>1</sup> SOURCE                                    | NAME OF TRUST   |
| <sup>2</sup> BENEFICIARY                               | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| <sup>3</sup> INCOME                                    | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| <sup>4</sup> ASSETS FROM WHICH OVER \$500 WAS RECEIVED | <input type="checkbox"/> UNKNOWN  |

|   |   |
|---|---|
| SOURCE                                    | NAME OF TRUST   |
| BENEFICIARY                               | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| INCOME                                    | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| ASSETS FROM WHICH OVER \$500 WAS RECEIVED | <input type="checkbox"/> UNKNOWN  |

|   |   |
|---|---|
| SOURCE                                    | NAME OF TRUST   |
| BENEFICIARY                               | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____   |
| INCOME                                    | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| ASSETS FROM WHICH OVER \$500 WAS RECEIVED | <input type="checkbox"/> UNKNOWN  |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY



**TRUSTEE STATEMENT****PART 10B** NOT APPLICABLE

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

|  |   |
|--|---|
| 1 NAME OF TRUST                                  |   |
| 2 TRUSTEE NAME                                   |   |
| 3 FILER ON WHOSE BEHALF STATEMENT IS BEING FILED | NAME  |
| 4 TRUSTEE STATEMENT                              | <p>I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Trustee Signature</p> |

**§ 572.023. Contents of Financial Statement in General**

(b) The account of financial activity consists of:

(8) Identification of the source and the category of the amount of all income received as beneficiary of a trust other than a blind trust that complies with Subsection (c) and identification of each trust asset, if known to the beneficiary from which income was received by the beneficiary in excess of \$500;

(14) identification of each blind trust that complies with Subsection (c), including:

(A) the category of the fair market value of the trust;

(B) the date the trust was created;

(C) the name and address of the trustee; and

(D) a statement signed by the trustee, under penalty of perjury stating that:

(i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and

(ii) to the best of the trustee's knowledge, the trust complies with this section.

(c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:

(1) the trustee:

(A) is a disinterested party;

(B) is not the individual;

(C) is not required to register as a lobbyist under Chapter 305;

(D) is not a public officer or public employee; and

(E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and

(2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.

(d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

# LIABILITIES OF BUSINESS ASSOCIATIONS

## PART 11B

NOT APPLICABLE

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

|                                     |  |   |
|-------------------------------------|--|---|
| <b>1</b> BUSINESS ASSOCIATION       | <input type="checkbox"/> NAME AND ADDRESS<br>(Check if Filer's Home Address) |   |
| <b>2</b> BUSINESS TYPE              |  |   |
| <b>3</b> HELD, ACQUIRED, OR SOLD BY | <input type="checkbox"/> FILER   | <input type="checkbox"/> SPOUSE   |
| <b>4</b> LIABILITIES                | DESCRIPTION  | CATEGORY  |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |
|                                     |  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999<br><input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

## PART 13

NOT APPLICABLE

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE

|                              |                         |
|------------------------------|-------------------------|
| <p><sup>1</sup> PROVIDER</p> | <p>NAME AND ADDRESS</p> |
| <p><sup>2</sup> AMOUNT</p>   |                         |
| <p>PROVIDER</p>              | <p>NAME AND ADDRESS</p> |
| <p>AMOUNT</p>                |                         |
| <p>PROVIDER</p>              | <p>NAME AND ADDRESS</p> |
| <p>AMOUNT</p>                |                         |
| <p>PROVIDER</p>              | <p>NAME AND ADDRESS</p> |
| <p>AMOUNT</p>                |                         |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

PART 15

NOT APPLICABLE

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE.

|   |   |
|---|---|
| <sup>1</sup> PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED |   |
| <sup>2</sup> FEE CATEGORY                                     | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED              |   |
| FEE CATEGORY  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED              |   |
| FEE CATEGORY  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED              |   |
| FEE CATEGORY  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED              |   |
| FEE CATEGORY  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED              |   |
| FEE CATEGORY  | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17

NOT APPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 257 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS--INSTRUCTION GUIDE.

|                                |                  |
|--------------------------------|------------------|
| <sup>1</sup> SOURCE OF BENEFIT | NAME AND ADDRESS |
| <sup>2</sup> BENEFIT           |                  |
| SOURCE OF BENEFIT              | NAME AND ADDRESS |
| BENEFIT                        |                  |
| SOURCE OF BENEFIT              | NAME AND ADDRESS |
| BENEFIT                        |                  |
| SOURCE OF BENEFIT              | NAME AND ADDRESS |
| BENEFIT                        |                  |

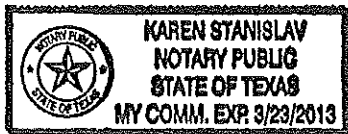
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2009, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

*[Handwritten Signature]*  
\_\_\_\_\_  
Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jim Dunnam, this the 16th day of February, 2010, to certify which, witness my hand and seal of office.

*[Handwritten Signature]* Karen Stanislav Notary Public  
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath