Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

PERSON	NAL FINANCIAL STATEMENT	FORM PFS COVER SHEET
For filings rec	ed in accordance with Government Code Chapter 572. uired in 2001, covering calendar year ending December 31, 2000. RM PFSINSTRUCTION GUIDE when completing this form.	TOTAL NUMBER OF PAGES FILED:
1 NAME	TITLE: FIRST; MI SENATOR TRUY NICKNAME: LAST: SUFFIX FRASER	Account # 3250 9 Date Received
2 ADDRESS	ADDRESS / PO BOX, APT / SUITE # CITY: STATE ZIP CODE 101 Huy 281, Ste-301 MARRIE FALLS, TX 78654	MAY 0 1 2001 Texas Ethics Commission
3 TELEPHONE NUMBER	AREA CODE PHONE NUMBER: EXTENSION PRO((830) 643-9400	Date (maged) Amount Amount FIAY 0 3 200
4 REASON FOR FILING STATEMENT	□ CANDIDATE □ STATE SENATE, N. STRILT 24 □ APPOINTED OFFICER	(INDICATE AGENCY)
SPOUSE	whose financial activity you are reporting (filer must report information about the filer had actual control over that activity): LINDA FRASEC CHILD 1	
In Parts 1 through required to disclose over that person's to	15, you will disclose your financial activity during the preceding calendar you not only your own financial activity, but also that of your spouse or a deperinancial activity. COPY AND ATTACH ADDITIONAL PAGES AS NE	ndent child if you had actual control

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When reporting information about providing the number under which	it a dependent child's the child is listed on t	activity, indicate he Cover Sheet.	the child about whom you are reporting by
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD
² EMPLOYMENT		NAME AND ADDRESS	OF EMPLOYER / POSITION HELD
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Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512) 463-5800	1-800-325-850
RETAINERS				PART 1B
than for services on a matter; value of the work actually per information, see FORM PFS. When reporting information	dent child have a "sut specified at the time of formed during the cal INSTRUCTION GUI about a dependent of	child's activity, indicate the child	ulure services in case e. Report information d the value of the ret	e of need, rather n here only if the ainer. For more
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STOCK					PART 2
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¹ BUSINESS ENTI	TY	10- TECHNOLO		AME	
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STOCK					PART 2
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STOCK					PART 2
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STOCK					PART 2
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¹ BUSINESS ENT	ITY	CARNIVAL	N	AME	
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STOCK					PART 2
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STOCK					PART 2
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1 BUSINESS ENT	ITY	CURNING	N.	AME	
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STOCK					PART 2		
category of the a INSTRUCTION G	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 PFSINSTRUCTION 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 BUSINESS ENTI				IAME			
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NOMBER OF SEL	ANLO	5,000 TO 9,999	10,000 OR MOR	_ -	☐ 1,000 TO 4,999		
IF SOLD	MET GAIN	☑ LESS THAN \$5,000		\$10,000- \$24 ,999	\$25,000OR MORE		
BUSINESS ENTIT	Υ			WE			
STOCK HELD OR	ACQUIRED BY	ELECTRODIC BILER	ARTS SPOUSE	T DEDENDENT CHILL			
NUMBER OF SHA		LESS THAN 100	X 100 TO 499	DEPENDENT CHIL	1,000 TO 4,999		
TOWNSELL OF STA		☐ 5.000 TO 9,999	☐ 10,000 OR MOR		1,000 10 4,553		
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999		\$25,000-OR MORE		
BUSINESS ENTIT	ſΥ	<u> </u>	NA	ME			
STOCK HELD OR	ACQUIRED BY	EMC S FILER	SPOUSE:	DEPENDENT CHIL	<u> </u>		
NUMBER OF SHA		LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999		
		5,000 TO 9,999	☐ 10,000 OR MOR	_	1,000 10 4,000		
IF SOLD	NET GAIN NET LOSS	LIESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	X \$25,000OR MORE		
		COPY AND ATTACH ADDITION	NAL PAGES AS NECESSA	RY			

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STOCK					PART 2
category of the INSTRUCTION When reporting	amount of the net GUIDE.	gain or loss realized	cquired. If some of from the sale.	or all of the stock wa For more informati	luring the calendar year s sold, also indicate the on, see FORM PFS n you are reporting by
¹ BUSINESS EN		ENDUAUE		MAME	
2 STOCK HELD	OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CH	U.D.
NUMBER OF S	SHARES	☐ I.ESS THAN 100	⊠ 100 TC 499	☐ 500 TO 999	1.000 TO 4.999
		5,000 TO 9,999	10.000 OR MOR	_	, 10 4.555
IF SOLD	M NET GAIN ☐ NET LOSS	K LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS EN	TITY	ENRON	N	AME	
STOCK HELD (OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF S	HARES	LESS THAN 100	☐ 100 TO 499	☒ 500 TO 999	1.000 TO 4.999
		5,000 TO 9,999	10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN	☑ LESS THAN \$5,000	55.000\$9,999	\$10,000\$24,999	325.000OR MORE
BUSINESS EN		EXTENSITY	N	AME	
STOCK HELD C	OR ACQUIRED BY	⊠ FILER '	SPOUSE	DEPENDENT CHI	LD
NUMBER OF S	HARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 CR MOR	☐ 500 TO 999 E	X 1.000 TO 4.999
IF SOLD	MET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24.999	\$25.000OR MORE
BUSINESS ENT	TITY	Exxon Mor		ME	
STOCK HELD C	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	.D
NUMBER OF SI	HARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
<u> </u>		☐ 5,000 TO 9,999	☐ 10.000 OR MORI	E	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000;9,999	\$10.000\$24.999	\$25,000OR MORE
BUSINESS ENT	TITY	FAIRCHILD SE	m Micoúbactor		
STOCK HELD O	R ACQUIRED BY	™ FILER	SPOUSE:	DEPENDENT CHIL	D
NUMBER OF SI	HARES	LESS THAN 100	☐ 100 TO 499	☒ 500 TO 999	☐ 1.000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 CR MORE		

☐ NET GAIN

■ NET LOSS

LESS THAN \$5,000

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IF SOLD

□ \$5,000--\$9,999 □ \$10,000--\$24,999 □ \$25,000--OR MORE

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STOCK					PART 2
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar ye 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.					
¹ BUSINESS ENT		FEDEX		NAME	
² STOCK HELD O	R ACQUIRED BY	FILER	☐ SPOUSE	DEPENDENT CH	WLD
3 NUMBER OF SH	IARES	LESS THAN 100	100 TO 499	Ø 500 TO 999	☐ t,000 TO 4,999
4 IF SOLD	☐ NET GAIN MET LOSS	LESS THAN \$5,00	00 🗆 \$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTI	TY			IAME	
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BUSINESS ENTI	ΤΥ	٠	N.	AME	
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STOCK HELD OF		FILER	☐ SPOUSE	DEPENDENT CHI	LD
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	□ NET GAIN MET LOSS	LESS THAN \$5,00	0 🔀 \$5.000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
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IF SOLD	□ NET GAIN	K LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE
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		<u>GENALSSAN</u>		CEUTICALS	
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IF SOLD	NET GAIN	LESS THAN \$5,000			\$25,000OR MORE
		COPY AND ATTACH ADDIT	TONAL PAGES AS NECESSA	AY	

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STOCK					PART 2
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¹ BUSINESS ENTI		GENERAL E	,	NAME	
² STOCK HELD OF	R ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CH	
3 NUMBER OF SH	ARES	☐ LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
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STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
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IF SOLD	☐ NET GAIN MET LOSS	LESS THAN \$5,000	\$5,000\$9,999	5 \$10.000\$24,999	☐ \$25.000OR MORE
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IF SOLD	□ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
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IF SOLD	☐ NET GAIN	LESS THAN \$5,000	-	<u> </u>	☐ \$25,000OR MORE
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² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	☐ DEPENDENT CHI	
³ NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4.999
4 IF SOLD	☐ NET GAIN ☑ NET LOSS	5,000 TO 9,999	☐ 10,000 OR MOF	\$10.000-\$24.999	S25,000OR MORE
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IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5.000-\$9.999	\$10.000-\$24,999	S25,000OR MORE
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STOCK HELD OR	ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHIL	LD
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STOCK HELD OR	ACQUIRED BY	⊠ . FILER	SPOUSE:	DEPENDENT CHIL	.D
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NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1.000 TO 4.999
		☐ 5.000 TO 9.999	10,000 OR MORE	=	ļ

NET GAIN

☐ NET LOSS

LESS THAN \$5,000

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IF SOLD

☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 🔀 \$25,000--OR MORE

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STOCK					PART 2
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When reporting providing the num	information about a nber under which the	dependent child's ac e child is listed on the (ctivity, indicate the Cover Sheet.	child about whom	you are reporting by
¹ BUSINESS ENT	TITY	INCYTE GE	ENOMICS	AMÉ	
² STOCK HELD C	R ACQUIRED BY	Ø FILER	☐ SPOUSE	DEPENDENT CHI	 LD
3 NUMBER OF SI	HARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		5,000 TO 9.999	10,000 OR MOR	RE	_ ,=== ,,
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENT	ΊΤΥ	7776 6 1 -		AME	
STOCK HELD C	PR ACQUIRED BY	TDFIDELD THER	<u>1εςμλοιοφιε</u> □ spouse	DEPENDENT CHI	LD
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		5,000 TO 9,999	10,000 OR MOR	iE	
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STOCK HELD C	R ACQUIRED BY	TINFOSPACE	SPOUSE	DEPENDENT CHI	
NUMBER OF SH		LESS THAN 100	100 TO 499	₭ 500 TO 999	1,000 TO 4,999
THOMBETTON OF	יאונט	5,000 TO 9,999	☐ 10,000 OR MOR		
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		X FILER	SPOUSE	DEPENDENT CHI	<u>_</u>
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		INTEL			
I STOCK HELD O	R ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHIL	LD

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☐ NET GAIN

☐ NET LOSS

NUMBER OF SHARES

IF SOLD

1,000 TO 4,999

☐ 500 TO 999

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

☐ 100 TO 499

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☐ 10,000 OR MORE

☐ LESS THAN 100 ☐ 5.000 TO 9,999

LESS THAN \$5,000

STOCK					PART 2		
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 PFSINSTRUCTION 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 BUSINESS ENTIT		t this is instead on the c		ME	·		
		KOHLS		<u></u>	····		
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL			
3 NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999		
		5,000 TO 9,999	☐ 10,000 OR MOR	E			
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
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IF SOLD	☐ NET GAIN MAT LOSS	LESS THAN \$5.000	\$5,000\$9,999	\$10,000·-\$24.999	\$25.000OR MORE		
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STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.p		
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☆ 500 TO 999	☐ 1,000 TO 4,999		
IF SOLD	□ NET GAIN ☑ NET LOSS	X LESS THAN \$5,000	\$5,000-\$9.999	\$10,000\$24.999	\$25,000-OR MORE		
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NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	⊠ 500 TO 999	1,000 TO 4,999		
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IF SOLD	☐ NET GAIN 158 NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
		COPY AND ATTACH ADDITE	DNAL PAGES AS NECESS	ARY			

STOCK					PART 2
and indicate the ca category of the a INSTRUCTION GI	ategory of the numb mount of the net UIDE.	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or from the sale. F	all of the stock was or more informatio	sold, also indicate the n, see FORM PFS-
		dependent child's ac child is listed on the C		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	LUMINANT		ME -	
² STOCK HELD OF	ACQUIRED BY	S FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
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4 IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
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IF SOLD	□ NET GAIN □ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	□ \$25.000OR MORE
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STOCK				·	PART 2
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BUSINESS ENTI	TY	McBIL	N)	AME	
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☐ 5,000 TO 9,999

☑ LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ 10,000 OR MORE

□ \$5,000--\$9,999 □ \$10,000--\$24,999 □ \$25,000--OR MORE

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IF SOLD

NET GAIN

☐ NET LOSS

Revised 10/24/2000

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STOCK					PART 2		
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 PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by							
providing the numb	er under which the	e child is listed on the (Cover Sheet				
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STOCK					PART 2
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STOCK					PART 2
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NET GAIN

■ NET LOSS

Texas Ethics Commis	sion P.O. B	ox 12070 Austi	n, Texas 78711-20	70 (512) 463-	5800 1-800-325-850
STOCK					PART 2
and indicate the ca category of the a INSTRUCTION GE	degory of the numb mount of the net JIDE.	oer of shares held or ac gain or loss realized	equired. If some or from the sale. F	r all of the stock was For more informatio	uring the calendar year sold, also indicate the en. see FORM PFS
providing the numb	formation about a per under which the	, dependent child's ac e child is listed on the l	tivity, indicate the Cover Sheet.	child about whom	you are reporting by
1 BUSINESS ENTI			N.	AME	
² STOCK HELD OF	ACQUIRED BY	SONIC TH	SPOUSE	DEPENDENT CHI	
3 NUMBER OF SH		☐ LESS THAN 100	⊠ 100 TO 499	500 TO 999	1,000 TO 4,999
NOMBER OF BIT	ANLO	5,000 TO 9,999	10,000 OR MOR		☐ 1,000 TO 4,999
4 IF SOLD	NET GAIN	X LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
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<u> </u>		5,000 TO 9,999	10.000 CR MOR	E	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999	\$25,000OR MORE
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		☐ 5.000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	⊠ \$25,000OR MORE
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	•	STAMFORD S	THERNATION	1AL	
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STOCK HELD OR		⊠ FILER	SPOUSE:	DEPENDENT CHIL	
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" OOLD	■ NET GAIN	LESS THAN \$5,000	1 1 \$5.000: \$9.999	\$10.000\$24.999	☐ \$25,000~OB MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE

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☐ NET LOSS

Texas Ethics Commis	sion P.O. E	30x 12070 Austi	n, Texas 78711-20	70 (512) 463	<u>-5800 1-800-325-850</u>
STOCK					PART 2
List each business	entity in which you	u. your spouse, or a de	pendent child held	or acquired stock du	uring the calendar year
) and indicate the ca	ategory of the numi	ber of shares held or a	cquired. If some o	r all of the stock was	Sold, also indicate the
INSTRUCTION G	Mount of the het UIDE.	gain or loss realized	from the sale.	for more information	on, see FORM PFS
When reporting in	iformation about a	denandent child's ac	ctivity indicate the	e child about whom	you are reporting by
providing the num	per under which th	e child is listed on the	Cover Sheet.	cond about wildin	you are reporting by
1 BUSINESS ENTI	TY	SUN MICROS		IAME	
² STOCK HELD OF	ACQUIRED BY	M FILER	SPOUSE	DEPENDENT CHI	
3 NUMBER OF SH	ARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	1 1,000 TO 4,999
		5,000 TO 9,999	☐ 10,000 OR MO	_	
4 IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25.000OR MORE
	NET LOSS				<u> </u>
BUSINESS ENTI	TY	Sylvan or	•	AME	
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		5,000 TO 9,999	☐ 10,000 OR MOF	_	
IF SOLD	NET GAIN	☑ LESS THAN \$5.000	\$5,000-\$9,999	S10,000\$24,999	☐ \$25,000OR MORE
	☐ NET LOSS	•			
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STOCK HELD OF	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999
		☐ 5.000 TO 9,999	☐ 10,000 OR MOR	ŧΕ	,
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
	NET LOSS				
BUSINESS ENTIT	Υ	TEXAS ILAST	RIMENTS	ME	
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LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ 10,000 OR MORE

☐ \$5,000-\$9,999 🔀 \$10,000-\$24,999 ☐ \$25,000--OR MORE

■ NET GAIN

☑ NET LOSS

IF SOLD

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512) 463-5800	1-800-325-850
STOCK				DADT 2

STOCK				PART 2
List each business entity in which you and indicate the category of the num category of the amount of the net INSTRUCTION GUIDE. When reporting information about a	ber of shares held or ac gain or loss realized	equired. If some or I from the sale. F	r all of the stock was For more information	s sold, also indicate the on, see FORM PFS
providing the number under which th	e child is listed on the	Cover Sheet.		you are reporting by
	TRADSMET		AME	
² STOCK HELD OR ACQUIRED BY	⊠ FILER	☐ SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD ⊠ NET GAIN ☐ NET LOSS	⊠.LESS THAN \$5,000	\$5,000-\$9,999	□ \$10,000\$24.999	\$25,000OR MORE
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BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD	☐ LESS THAN 100 ☐ 5,000 TO 9,999	NA E KA FEUTICS ☐ SPOUSE 100 TO 499 ☐ 10,000 OR MORI ☐ \$5,000~\$9,999	DEPENDENT CHIL 500 TO 999	LD 1.000 TO 4,999
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STOCK					PART 2
and indicate the ca category of the a INSTRUCTION G	ategory of the numb Imount of the net UIDE.	oer of shares held or a gain or loss realized	equired. If some o	r all of the stock was For more informatio	uring the calendar year sold, also indicate the on, see FORM PFS
providing the numb	ber under which the	dependent child's ac e child is listed on the	ctivity, indicate the Cover Sheet.	child about whom	you are reporting by
¹ BUSINESS ENTI		VERITAS	N	AME	
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3 NUMBER OF SH	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	10,000 OR MOR	500 TO 999	1,000 TO 4,999
4 IF SOLD	M NET GAIN ☐ NET LOSS	☑ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
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Texas Ethics Commis	sion P.O. E	30x 12:070 Austi	n, Texas 78711-20	70 (512) 463	5800 1-800-325-850
STOCK					PART 2
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1 BUSINESS ENTI	TY	WATSON L	JYATT	AME	· · · · · · · · · · · · · · · · · · ·
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STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
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		5,000 TO 9,999	10,000 OR MOR	E	
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		☐ 5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	5 \$10,000 \$24 ,999	□ \$25,000OR MORE
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STOCK					PART 2
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1 BUSINESS ENTIT	Υ	XILINX	NA	ME	_
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 9 99 E	1,000 TO 4,999
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IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10.000-\$24.999	☐ \$25,000-OR MORE
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STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
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	_	☐ 5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	□ \$25,000OR MORE
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IF SOLD BUSINESS ENTIT STOCK HELD OR	NET GAIN NET LOSS TY ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499	500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL	1,000 TO 4,999 \$25,000OR MORE LD 1,000 TO 4,999

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BONDS, NOTES, AND OTHER COMMERCIAL PAPER

PART 3

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, 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.

providing the number under which the child is listed on the Cover Sheet.				
DESCRIPTION OF INSTRUMENT	SAN ANTONIO ELECTRIC : GAS BONDS			
² HELD OR ACQUIRED BY	☑ FILER ☐ SPOUSE ☐ DEPENDENT CHILD			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000OR MORE			
DESCRIPTION OF INSTRUMENT	Austin Utility System Bonds			
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25.000OR MORE			
DESCRIPTION OF INSTRUMENT	NORTH EAST ISD ISCHAS			
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD			
IF SOLD NET GAIN NET LOSS	☐ I.ESS THAN \$5,000 ☐ \$5.000\$9,999 ☐ \$10,000\$24,899 ☐ \$25,000OR MORE			
COPY A	AND ATTACH ADDITIONAL PAGES AS NECESSARY			



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BONDS, NOTES, AND OTHER COMMERCIAL PAPER

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When reporting information about a dependent child's activity, indicate the child about whom you are repo

	the child is listed on the Cover Sheet.
DESCRIPTION OF INSTRUMENT	LUBBOOK ISD Bosids
² HELD OR ACQUIRED BY	☐ SPOUSE ☐ DEPENDENT CHILD
IF SOLD	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
☐ NET LOSS	
DESCRIPTION OF INSTRUMENT	PORT DECHES-GRUSES ISD BUSDS
HELD OR ACQUIRED BY	☐ SPOUSE ☐ DEPENDENT CHILD
IF SOLD ☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
☐ NET LOSS	
DESCRIPTION OF INSTRUMENT	MESQUITE ISD BODAS
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD	☐ 1.ESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,899 ☐ \$25,000OR MORE
□ NET GAIN □ NET LOSS	[[[[[]]]]] [[]] [] [] []
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BONDS, NOTES, AND OTHER COMMERCIAL PAPER

PART 3

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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.

providing the number under which	the Child is listed on the Odver Oricet.
DESCRIPTION OF INSTRUMENT	City of EDINBURG BUNDS
² HELD OR ACQUIRED BY	TI FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24.999 ☐ \$25.000OR MORE
DESCRIPTION OF INSTRUMENT	CITY OF HOUSTON BUILDS
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	TEXAS WATER DEGELEPMENT BOARD BONDS
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD ☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000OR MORE
☐ NET LOSS	
COPY A	AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES, AND OTHER COMMERCIAL PAPER

PART 3

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, 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.
DESCRIPTION OF INSTRUMENT	CAY OF LEWISSILLE BURDS
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	STATE OF TEXAS BUDDS
HELD OR ACQUIRED BY	☑ FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	City OF GRAPEVINE BONDS
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
СОРУ	AND ATTACH ADDITIONAL PAGES AS NECESSARY

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BONDS, NOTES, AND

PART 3

OTHER COMMER	OTHER COMMERCIAL PAPER				
List all bonds, notes, and other concalendar year. If sold, indicate the information, see FORM PFSINST	mmercial paper held or acquired by you, your spouse, or a dependent child during the se category of the amount of the net gain or loss realized from the sale. For more FRUCTION GUIDE.				
	t a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.				
DESCRIPTION OF INSTRUMENT	CLEAR CREEK ISD BONDS				
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD				
3 IF SOLD					
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,899 ☐ \$25,000OR MORE				
☐ NET LOSS					
DESCRIPTION OF INSTRUMENT	AUSTIN ISD BONDS				
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD				
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE				
DESCRIPTION OF INSTRUMENT	LAMAR CISD BONDS				
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD				
IF SOLD	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE				

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

■ NET GAIN

■ NET LOSS

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INCOME FROM INTEREST, DIVIDENDS,
ROYALTIES, AND RENTS

PART 4

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.				
1 SOURCE OF INCOME	GRISTOL, MYERS, SENIBB SYS PARK FLACE NEW YORK, MY 10154			
² RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD	
3 AMOUNT	⊠ \$500~\$4.999	\$5,000\$9,999	□ \$10,000\$24,999 □ \$25,000OR MORE	
SOURCE OF INCOME	CITIGROUP 1200 SMITH HOUSTON, TX 77		DADDRESS	
RECEIVED BY	⊠ FILER	SPOUSE	☐ DEPENDENT CHILD	
AMOUNT	5 2 \$:500\$4,999	\$5,000\$9,999	□ \$10,000\$24.999 □ \$25,000OR MORE	
SOURCE OF INCOME	NAME AND ADDRESS EXXID MEBIL 5959 LAS COLINXS TRUIDH, TX 75039			
RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	1500\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INCOME FROM INTEREST, DIVIDENDS,
ROYALTIES, AND RENTS

PART 4

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 PFSINSTRUCTION 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.				
	 		<u> </u>	
SOURCE OF INCOME	Brichan C. =		D ADDRESS	
OODINGE OF INGOIME	GENERAL ELE	CTICIL		
	3135 EASTER	TURAPIRE		
	FAIRFIELD, C-	T06431		
2				 .
RECEIVED BY				
	™ FILER	SPOUSE:	☐ DEPENDENT C	HILD
	-		_	
3				
AMOUNT	⊠ \$500\$4,999	\$5.000\$9.999	\$10,000\$24,999	☐ \$25,000~OR MORE
	13 11000-34,500			I \$20,000-On MORE
DOUBLE OF INCOME	T	NAME AND	ADDRESS	
SOURCE OF INCOME	JOHNSON & J	CHUSTIN		
	PO BOX 3500			
	JERSEY CITY,	130.7 a		
	, ,,	- 30)		
DECEIVED BY				
RECEIVED BY	_		_	
	🔀 FILER	□ SPOUSE	☐ DEPENDENT C	HILD

SOURCE OF INCOME

SCHERING - PLOUGH 2000 GALLEPING WAY

\$500--\$4,999

KENILWORTH, NJ 07033

RECEIVED BY

🔀 FILER

SPOUSE

DEPENDENT CHILD _____

AMOUNT

AMOUNT

\$500-\$4,999

NAME AND ADDRESS

\$5,000--\$9,998 \$10,000--\$24,999 \$25,000--OR MORE

☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE

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INCOME FROM INTEREST, DIVIDENDS, ROYALTIES, AND RENTS

PART 4

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.

providing the number under wr	providing the number under which the child is listed on the Cover Sheet.				
SOURCE OF INCOME	Wells Fargo NAME AND ADDRESS				
	464 CALIFORNI	A			
	SAN FRANCISCO	, CAGHICH			
² RECEIVED BY					
	15 FILER	SPOUSE	DEPENDENT CHILD		
3 AMOUNT	\$500\$4,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
SOURCE OF INCOME	BANK OF NEW	YORK NAME AN	D ADDRESS		
	I WALL STREET				
	NEW YORK BY				
	TO COS TORP D)	10781			
RECEIVED BY	⊠ FILER	☐ SPOUSE	DEPENDENT CHILD		
AMOUNT	⊠. \$500\$4,999	eee,e\$- 000, 2 \$ 🗍	\$10,000\$24,999 \$25,000OR MORE		
SOURCE OF INCOME	0 (ADDRESS		
SCOTIOE OF HISCHIE	ALEX BANNA,	IN-			
	POBLE 1776 BALTIMORE, MI				
	BALTIMURE, MI	813v3			
RECEIVED BY	⊠ FILER	☐ SPOUSE	DEPENDENT CHILD		
AMOUNT	☐ \$ 500\$4 ,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☒ \$25,000OR MORE		
COP	AND ATTACH ADDIT	ONAL PAGES AS	NECESSARY		
					

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PERSONAL NOTES

PART 5

AND LEASE AGREEMENTS					
agreement at any time during the c	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. For more information, see FORM PFSINSTRUCTION GUIDE.				
When reporting information about providing the number under which	t a dependent child's the child is listed on th	activity, indicate the e Cover Sheet.	e child about whom you are reporting by		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	12	A			
² LIABILITY OF	☐ FILER	SPOUSE:	DEPENDENT CHILD		
³ GUARANTOR					
4 AMOUNT	S1,000\$4,999	55,000-\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT		- · · · · · · · · · · · · · · · · · · ·			
LIABILITY OF	☐ FILEA	SPOUSE	DEPENDENT CHILD		
GUARANTOR					
AMOUNT	\$1,000\$4,999	☐ \$5,000- \$9,99 9	\$10,000\$24,999 \$25,000-OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD		
GUARANTOR					
AMOUNT	\$ 1,000\$4,999	\$5,000-\$9,999	\$10,000\$24,999 \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

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INTERESTS IN REAL PROPERTY

PART 6A

calendar year. If the interest was s	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 providing the number under which	a dependent child the child is listed on	's activity, indicate the Cover Sheet.	the child about whom you are reporting by	
1 HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION LOTS ACRES	ı	NUMBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
STREET ADDRESS NOT APPLICABLE		STREET ADDRESS, INCI	LUDING CITY, COUNTY, AND STATE	
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	5 5			
S IF SOLD NET GAIN NET LOSS	LESS THAN \$5	.000 🗆 \$5.000\$9,9	99 🗌 \$10,000\$24,999 🔲 \$25.000OR MORE	
HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION LOTS ACRES	٨	LIMBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
STREET ADDRESS		STREET ADDRESS, INCL	JUDING CITY, COUNTY, AND STATE	
NAMES OF PERSONS RETAINING AN INTEREST ONE APPLICABLE (SEVERED MINERAL INTEREST)				
IF SOLD NET GAIN NET LOSS			99	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

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INTERESTS IN BUSINESS ENTITIES	PART 6B

	PAN UD			
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 calegory 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 providing the number under which	t a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.			
1 HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD			
² DESCRIPTION	NAME AND ADDRESS			
3 IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5.000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25.000OR MORE			
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD			
DESCRIPTION	NAME AND ADDRESS			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD			
DESCRIPTION	NAME AND ADDRESS			
IF SOLD NET GAIN NET LOSS	☐ LIESS THAN \$5,000 ☐ \$5.000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY			

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GIFTS				PART 7
Identify any person or organ and describe the gift. Do no lobbyist under Government (person related to the recipie PFSINSTRUCTION GUIDS	1 include: 1) expenditu Sode Chapter 305, 2) Int within the second of E.	res required to be reported political contributions reported by consanguinity or	d by a person required to be ted as required by law, or 3) raffinity. For more informat	registered as a gifts given by a ion. <i>see</i> FORM
When reporting information providing the number under	about a dependent which the child is liste	child's activity, indicate the don the Cover Sheet.	e child about whom you a	re reporting by
1 DONOR		NIA	ND ADDRESS	
2 RECIPIENT	∏ FILER	SPOUSE	DEPENDENT CHILD	·
3 DESCRIPTION OF GIFT				
DONOR		NAME AN	ID ADDRESS	
RECIPIENT	□ FILER	□ SPOUSE	DEPENDENT CHILD	
DESCRIPTION OF GIFT				
DONOR		NAME AN	CADDRESS	
RECIPIENT	T FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION OF GIFT				
CO	PY AND ATTACH /	ADDITIONAL PAGES AS	NECESSARY	

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TRUST INCOME				PART 8
Identify each source of income the category of the amount of in more than \$500 in income, if the GUIDE. When reporting information ab	icome received. All e identity of the ass bout a dependent o	so identify each asset of set is known. For more in child's activity, indicate t	the trust from which the iformation, <i>see</i> FORM F	beneficiary received PSSINSTRUCTION
providing the number under wh	ich the child is liste	d on the Cover Sheet.	<u> </u>	
SOURCE		NIA	MEOFTPJST	
² BENEFICIARY	☐ FILER	☐ SPOUSE	DEPENDENT CH	HILD
3 INCOME	☐ LESS THA	N \$5,000	99 🗌 \$10.000\$24,999	□ \$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN				
SOURCE		MAN	È OF TRUST	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CH	IILD
INCOME	☐ L FSS THA	N \$5,000	9 🔲 \$10.000\$24.999	□ \$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED			·	
□ UNKNOWN				
SOURCE		NAM	E OF TRUST	
BENEFICIARY	☐ FILER	☐ SPOUSE	☐ DEPENDENT CH	ILD
INCOME	LESS THA	N \$5,000	9 🗌 \$10,000\$24,999 [\$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED		,		-
UNKNOWN				
CORY	AND ATTACH	ADDITIONAL PAGES A	C NECECCADY	

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CORPORATE & PARTNERSHIP ASSETS

PART 9A

Describe all assets of each corporation or partnership 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.

CORPORATION		NAME AF	ND ADDRESS	
OR PARTNERSHIP	N	lja		
² HELD, ACQUIRED, OR SOLD BY	FILER	☐ SPOUSE		CHILD
3 ASSETS	DES	CRIPTIO'4	CATE LESS THAN \$5.000 S10.000-\$24.999 LESS THAN \$5.000 S10,000-\$24.999 LESS THAN \$5.000 S10,000-\$24.999 LESS THAN \$5.000 S10,000-\$24,999 LESS THAN \$5.000 S10,000-\$24,999 LESS THAN \$5,000 S10,000 \$24,999 LESS THAN \$5,000 S10,000-\$24,999 LESS THAN \$5,000 S10,000-\$24,999	\$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999 \$5,000\$9,999
	OBY AND ATTACH	ADDITIONAL PAGES	\$10,000-\$24,999	\$25,000OR MORE

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CORPORATE & PARTNERSHIP LIABILITIES

PART 9B

Describe all liabilities of each corporation or partnership 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 liabilities. 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

1	NAME AND ADDRESS				
OR PARTNERSHIP		NA			
² HELD, ACQUIRED, OR SOLD BY	☐ FILER	☐ SPOU	JSE	DEPENDENT	CHILD
3 LIABILITIES		DESCRIPTION		CATE	GORY
LIADILITIES			 	LESS THAN \$5,000	\$5.000\$9.999
			İ	T \$10,000 -\$24.999	☐ \$25,000OR MORE
			İ	LESS THAN \$5,000	\$5,000\$9.999
			İ	\$10,000\$24,9 99	☐ \$25.000OR MORE
				LESS THAN \$5,000	\$5,000\$9,999
				\$10.000\$24,999	☐ \$25,000OR MORE
				LESS THAN \$5,000	55,000\$9,999
			į	\$10,000\$24,999	☐ \$25,000OR MORE
				LESS THAN \$5,000	\$5,000\$9,999
				S10,000\$24.999	S25,000QR MORE
			1	LESS THAN \$5.000	55,000- \$9,999
				\$10,000\$24,999	\$25,000-OR MORE
		·		LESS THAN \$5,000	\$ 5,000\$9,999
				\$10,000\$24.999	\$25,000OR MORE
j				LESS THAN \$5,000	\$5,000\$9.999
				\$10,000\$24,999	\$25.000OR MORE
	ODV AND ATTA	CH ADDITIONAL	DACER		

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BOARDS AND EXECUTIVE POSITIONS

PART 10

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, or proprietorships, stating the name of the organization and the position held. 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 ORGANIZATION		NA	
POSITION HELD			
³ POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	☐ DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD
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EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 11

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under Penal Code section 36.07(b), 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 (Government Code Chapter 305). For more information, see FORM PFS-INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS			
² AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

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INTEREST IN BUSINESS

PART 12

IN COMMON WITH LOBBYIST Identify each partnership, joint venture, or other business association, other than a publicly-held corporation, in which you and a person registered as a lobbyist under Government Code Chapter 305 both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE. NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY** NAME AND ADDRESS **BUSINESS ENTITY**

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FEES RECEIVED FOR SERVICES RENDERED

PART 13

TO A LUBBYIST OR LUBBYIST'S EMPLOYER				
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under Government Code Chapter 305, 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.				
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	NIA			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LES\$ THAN \$5,000 ☐ \$5,000\$9.999 ☐ \$10.000\$24.999 ☐ \$25,000 OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 -\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9.999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
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REPRESENTATION BY LEGISLATOR

PART 14

BEFORE STATE AGENCY					
This section applies only to memb person for compensation before a name of the person represented, a information, see FORM PFSINST	a state agency in the example and the category of the a	ecutive branch m	ust arouido the nec	no of the second the	
1 STATE AGENCY		NIA	<u>.</u>		
² PERSON REPRESENTED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9. 999	\$10,000\$24,999	□ \$25,000OR MORE	
STATE AGENCY					
PERSON REPRESENTED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000OR MORE	
STATE AGENCY					
PERSON REPRESENTED					
FEE CATEGORY		\$5,000 -89,999	S10,000\$24,999	☐ \$25,000OR MORE	
STATE AGENCY		-			
PERSON REPRESENTED					
FEE CATEGORY		\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
STATE AGENCY					
PERSON REPRESENTED					
FEE CATEGORY	☐ I.ESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE	
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(512) 463-5800

1-800 325-8506

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 15

Penal Code Section 36.10 provides that the gift prohibitions set out in Penal Code Section 36.08 do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under Government Code Chapter 572 or Election Code Title 15 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 Election Code Title 15, the benefit is reportable here. For more information, see FORM PFS--INSTRUCTION GUIDE.

SOURCE OF BENEFIT	NAME AND ADDRESS			
² 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				

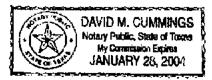
(512) 463-5800

1-800-325-8506

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 effirm, that my financial statement is true and correct and includes all information required to be reported by me under Chapter 572, Government Code.



Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said TROY FRASTE	this the 24# day
of Afric	

Signature of difficer administering path

Frint name of officer administering eath

Title of officer administering oath