CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Texas Ethics Commission

FORM C/OH COVER SHEET PG 1

1-800-325-8506

(512)463-5800

1	ACCOUNT #	2 PAGE#				
The C/OH INSTRUCTION GUIDE explains how to complete this form.	(Ethics Commission filers)	1 of 127				
	01080801	1 01 127				
3 CANDIDATE / MS/MRS/MR FIRST Gerald	МІ	OFFICE USE ONLY				
NAME		Date Received				
NICKNAME LAST Jerry Eversole	SUFFIX					
Jeffy Eversore						
4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY.	STATE; ZIP CODE	-				
OFFICEHOLDER	STATE, ZIF CODE					
MAILING 1 E Greenway Plaza Ste 225						
		Date Hand-delivered or Date Postmarked				
X Change of Address						
		Receipt # Amount				
5 CAMPAIGN MS/MRS/MR FIRST Pat	MI	Date Processed				
TREASURER NAME		Data Imaged				
NICKNAME LAST Eversole	SUFFIX	Date Imaged				
Eversore						
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #	CITY; STATE;	ZIP CODE				
TREASURER 1 E Greenway Plaza Ste 225 ADDRESS 1 Houston TX 77046						
ADDRESS Houston, TX 77046 (Residence or business)						
(1.00.00.100 01.000.1000)						
7 CAMPAIGN AREA CODE PHONE NUMBER	EXTENSION					
TREASURER (713) 526-3399 PHONE						
8 REPORT TYPE	Runoff	15th day after campaign treasurer appointment (officeholder only)				
July 15 8th day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)				
9 PERIOD Month Day Year	Month Day	Year				
COVERED THROUG		07				
07/01/2007	12/31/20	07				
10 ELECTION ELECTION DATE ELECTION TYPE						
Month Day Year Primary	Runoff	General Special				
L Filliary	Kulloli	General				
11 OFFICE OFFICE HELD (if any)	12 OFFICE SOUGHT (if known))				
Harris Co Commissioner Pct 4						
13 NOTICE OF DIRECT Direct campaign expenditures are campaign expenditures are campaign expenditures.						
CAMPAIGN Candidates are required to disclose this information only	if they receive notification of the dire	ect campaign expenditure.				
EXPENDITURE BY OTHER Name						
INDIVIDUALS						
Address/PO Box; Apt. / Suite #; City; State; Zip 0	code					
additional pages						
<u> </u>	l					
CO TO P/						
GOTOPA	GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

(512)463-5800

14 C/OH NAME Eversole, Gerald 15 ACCOUNT # (Ethics Common of the Common					
16 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the canout the candidate's or officeholder's knowledge or consent. Candidatey receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	316,550.00	
EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$	193.99		
4. TOTAL POLITICAL EXPENDITURES			\$	276,253.85	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			1,852,586.98	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00	
18 AFFIDAVIT					
		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Coc	s all information re		
			2		
		Signature of C	Candidate or Office	enolder	
AFFIX NOTARY S	STAMP / SEAL ABOV	Έ			
Sworn to and subscrib	ed before me, by the	he said	, this the	day	
of, 2	of, 20, to certify which, witness my hand and seal of office.				
Signature of officer admi	nistering oath	Print name of officer administering oath	Title of officer a	dministering oath	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2	23 Report: 3/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Adams, Kent)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/16/2007	6 Contributor address; City; State; Zip Code 550 Fannin Suite 800 Beaumont, TX 77701		\$250.00	 - -
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/10/2007	Contributor address; City; State; Zip Code 7502 Foster Creek Dr Houston, TX 77469		\$625.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	AIA Engineers LTD	ŕ	contribution (\$)	description (if applicable)
07/31/2007	Contributor address; City; State; Zip Code 15310 Park Row Houston, TX 77084		\$1,250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor uut-of-state PAC (ID# Ainsworth, James	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2007	Contributor address; City; State; Zip Code 3702 Glenhaven Houston, TX 77025-1205		\$1,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Data	Full name of contributor	, \	Amount of	In kind contribution
Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2007	Contributor address; City; State; Zip Code 50 Briar Hollow Suite 320 East Houston, TX 77027		\$1,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	•	Toxas, complete schedule 1)
i iiiisipai oodu	sales., sale title (and included only)	Zinployor (Goo iii	o dollorio)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2	23 Report: 4/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Alleman, Susan	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/02/2007	6 Contributor address; City; State; Zip Code 8323 Southwest Freeway Suite 200 Houston, TX 77074		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Angel, Greg	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/15/2007	Contributor address; City; State; Zip Code 5210 West Road Baytown, TX 77521		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete constant 1,
		,			
	Date	Full name of contributor uut-of-state PAC (ID# Arcadis G&M Inc PAC	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/06/2007	Contributor address; City; State; Zip Code 11490 Westheimer Suite 600 Houston, TX 77077		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	,	тома, сотприя сописано н
	Date	Full name of contributor uut-of-state PAC (ID# Aviles, Dionel	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/10/2007	Contributor address; City; State; Zip Code 5790 Windfern Houston, TX 77041		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	Date	Baker, Michael	· · · · · · · · · · · · · · · · · · ·	contribution (\$)	description (if applicable)
	12/29/2007	Contributor address; City; State; Zip Code 785 Greens Parkway Suite 100 Houston, TX 77076		\$2,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	,	, <u> </u>
	, ,		, , ,	,	

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/2	23 Report: 5/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Berg Oliver PAC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/31/2007	6 Contributor address; City; State; Zip Code 14701 St Marys Lane Suite 400 Houston, TX 77079		\$1,250.00	
					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/09/2007	Contributor address; City; State; Zip Code 610 W Greens Road Houston, TX 77067		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/05/2007	Contributor address; City; State; Zip Code 7 Grogan's Park Drive Suite 3 The Woodlands, TX 77380		\$1,250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/10/2007	Contributor address; City; State; Zip Code 711 Louisiana Suite 2300 Houston, TX 77002		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/14/2007	Contributor address; City; State; Zip Code 21020 Park Row Drive Katy, TX 77449		\$5,000.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/2	23 Report: 6/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor □ out-of-state PAC (ID# Canine, Jay)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/08/2007	6 Contributor address; City; State; Zip Code 5757 Woodway Houston, TX 77057		\$1,250.00	 - -
				·	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/09/2007	Contributor address; City; State; Zip Code 55 Waugh Drive Suite 800 Houston, TX 77007-5833		\$2,500.00	i
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	vation / Job title (See Instructions)	Employer (See In:	`	Toxas, complete constant 1/
		,			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/01/2007	Contributor address; City; State; Zip Code 1800 West Loop South Suite 1300 Houston, TX 77027		\$2,500.00	i
				·	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/10/2007	Contributor address; City; State; Zip Code 2925 Briarpark Suite 850 Houston, TX 77056		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 7322 Southwest Freeway Suite 470 Houston, TX 77074-2033		\$625.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

TI	ne Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE # Schedule: 5/2	23 Report: 7/127
2 FI	LER NAME	Eversole, Gerald			3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor Cibor, Joseph	out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8
07	/18/2007	6 Contributor address; 6100 Hillcroft Houston, TX 77081	City; State; Zip Code		\$2,500.00	 - -
					(If travel outside of	Texas, complete Schedule T)
9 Pr	incipal occup	eation / Job title (See Instruction	s)	10 Employer (See In	structions)	
	Date	Full name of contributor CLR PAC	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07	/19/2007	Contributor address; 7600 W Tidwell Suite 400 Houston, TX 77040	City; State; Zip Code		\$5,000.00	I
					(If travel outside of	Texas, complete Schedule T)
Dr	inginal again	Loation / Job title (See Instruction	۵)	Employer (See In	<u> </u>	Texas, complete concade 17
FI	пстрат оссир	ation / Job title (See Instruction	5)	Employer (See in	structions)	
	Date	Full name of contributor Cobb, C Harold	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07	/18/2007	Contributor address; 11555 Clay Road Suite 100 Houston, TX 77043-1182	City; State; Zip Code		\$5,000.00	
					(If travel outside of	Texas, complete Schedule T)
Pr	incipal occup	pation / Job title (See Instruction	s)	Employer (See In	structions)	
	Date	Full name of contributor Colwell, Joel	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07	/10/2007	Contributor address; 5225 Katy Freeway Suite 400 Houston, TX 77007	City; State; Zip Code		\$2,500.00	
					(If travel outside of	Texas, complete Schedule T)
Pr	incipal occup	ation / Job title (See Instruction	s)	Employer (See In	<u> </u>	, , , , , , <u>–</u>
	Date	Full name of contributor Cunningham, Brian	ut-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07	/18/2007	Contributor address; 9822 Whithorn Dr Suite A Houston, TX 77095	City; State; Zip Code		\$1,250.00	1
					(If travel outside of	Texas, complete Schedule T)
Pr	incipal occup	pation / Job title (See Instruction	s)	Employer (See In	structions)	

SCHEDULE A

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/2	23 Report: 8/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dabhi, Madarsinh)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/01/2007	6 Contributor address; City; State; Zip Code 21210 Park York Dr Katy, TX 77450		\$500.00	 - -
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 3100 West Alabama St Houston, TX 77098		\$10,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	· · · · · · · ·
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2007	Contributor address; City; State; Zip Code PO Box 944 Cypress, TX 77410-0944		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/03/2007	Contributor address; City; State; Zip Code 2180 North Loop West Suite 305 Houston, TX 77018		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/13/2007	Contributor address; City; State; Zip Code 10111 Richmond Ave 130 Houston, TX 77042		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	,,, ., ., ., ., ., ., ., ., .,
			,	•	

SCHEDULE A

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 7/2	23 Report: 9/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Eastveld, Donald)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/20/2007	6 Contributor address; City; State; Zip Code 15120 Northwest Freeway Suite 190 Houston, TX 77040		\$10,000.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/10/2007	Contributor address; City; State; Zip Code 7255 Langtry Suite 100 Houston, TX 77040		\$1,250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/10/2007	Contributor address; City; State; Zip Code 32 Bradford Cir Sugar Land, TX 77479		\$625.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/05/2007	Contributor address; City; State; Zip Code 1027 Mosher Lane Houston, TX 77088-1956		\$250.00	
				·	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/09/2007	Contributor address; City; State; Zip Code 2010 East Broadway Pearland, TX 77581		\$1,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	·	. s.nau, complete conclude 1/

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/2	23 Report: 10/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Friedman, J Kent)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/11/2007	6 Contributor address; City; State; Zip Code 1330 Post Oak Boulevard Suite 2000 Houston, TX 77056		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/31/2007	Contributor address; City; State; Zip Code 17211 Houston Dr Cypress, TX 77433		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	l -	, , , , , , , , , , , , , , , , , , ,
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/18/2007	Contributor address; City; State; Zip Code 7915 Westglen Drive Houston, TX 77063		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	· ·	, , , , , , _
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/03/2007	Contributor address; City; State; Zip Code 10777 Westheimer Road Suite 400 Houston, TX 77042		\$2,500.00	 -
				<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/18/2007	Contributor address; City; State; Zip Code 5555 San Felipe Suite 1000 Houston, TX 77056		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	,

The lns	RUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/2	23 Report: 11/127
2 FILER N	AME Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID Ghanem, Richard	#)	7 Amount of contribution (\$)	8
07/14/2	6 Contributor address; City; State; Zip Code 12841 Jones Road Suite 101 Houston, TX 77070		\$5,000.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal	occupation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2	Contributor address; City; State; Zip Code 11011 Richmond Avenue Suite 700 Houston, TX 77042		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal	occupation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2	O07 Contributor address; City; State; Zip Code 11223 Claymore Rd Houston, TX 77024-6704		\$1,000.00	
			(If traval autaida of	Toyon complete Schodule T\
Principal	occupation / Job title (See Instructions)	Employer (See In	1	Texas, complete Schedule T)
	,	, ,, , (====	,	
Date	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution
	Greenberg Traurig PAC		contribution (\$)	description (if applicable)
08/29/2	Contributor address; City; State; Zip Code 1000 Louisiana Suite 1800 Houston, TX 77002		\$1,250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal	occupation / Job title (See Instructions)	Employer (See In	1 .	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/12/2	Contributor address; City; State; Zip Code 109 N Post Oak Lane Suite 600 Houston, TX 77024		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal	occupation / Job title (See Instructions)	Employer (See In	structions)	

SCHEDULE A

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 10)/23 Report: 12/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gunda, Ramesh)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
(07/30/2007	6 Contributor address; City; State; Zip Code 7322 Southwest Freeway Suite 1802 Houston, TX 77074		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(07/30/2007	Contributor address; City; State; Zip Code 1001 West Loop South Suite 200 Houston, TX 77027		\$5,000.00	
		Houston, TA 11021		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete concade 1)
		(p.c) (0.0		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(08/01/2007	Contributor address; City; State; Zip Code 410 West Grand Parkway 4th Floor Katy, TX 77494		\$5,000.00	
		<i>"</i>		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(07/02/2007	Contributor address; City; State; Zip Code One Stonegate Park Court Spring, TX 77379		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
(07/18/2007	Contributor address; City; State; Zip Code 13333 Northwest Freeway Suite 150		\$1,000.00	
		Houston, TX 77040		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Tamas, complete consumer,

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 11	/23 Report: 13/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Haynes & Boone PAC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/27/2007	6 Contributor address; City; State; Zip Code 901 Main St Suite 3100 Dallas, TX 75202		\$5,000.00	 - -
_		1 (11 111 (2 1 1 1 1 1		•	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/11/2007	Contributor address; City; State; Zip Code 1022 Martin Street Houston, TX 77018-2016		\$5,000.00	
		,			·
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	•	Texas, complete Schedule T)
	т ппораг оссир	,	Employer (dec iii	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/06/2007	Contributor address; City; State; Zip Code 711 Rankin Road Houston, TX 77073		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/05/2007	Contributor address; City; State; Zip Code 7915 Westglen Drive Houston, TX 77063		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 9511 West Sam Houston Pkwy N Houston, TX 77064		\$1,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

SCHEDULE A

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	/23 Report: 14/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hoover Slovacek LLP	!)	7 Amount of contribution (\$)	8
07/31/2007	6 Contributor address; City; State; Zip Code 5847 San Felipe Suite 2200 Houston, TX 77057		\$500.00	
			` `	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Houston Council of Engineering Companies PAC	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2007	Contributor address; City; State; Zip Code 2150 West 18th Street Suite 205 Houston, TX 77008		\$5,000.00	
			(If traval autoide of	Tawaa aammiata Sahadula T\
Principal occur	pation / Job title (See Instructions)	Employer (See In:	,	Texas, complete Schedule T)
i iliopai occu	valion, oop tille (oce mandellons)	Employer (See iii	ou delions)	
Date	Full name of contributor uut-of-state PAC (ID# Hurwitz, Charles	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/02/2007	Contributor address; City; State; Zip Code 1330 Post Oak Blvd Suite 2000 Houston, TX 77056		\$2,500.00	ι
			-	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/21/2007	Contributor address; City; State; Zip Code 5005 Riverway Suite 500 Houston, TX 77056		\$1,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/16/2007	Contributor address; City; State; Zip Code 8588 Katy Freeway Suite 441 Houston, TX 77024		\$1,250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	structions)	

SCHEDULE A

1-800-325-8506

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 13	3/23 Report: 15/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jones, James	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/19/2007	6 Contributor address; City; State; Zip Code 6335 Gulfton Suite 100 Houston, TX 77081		\$5,000.00	
			l `	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2007	Contributor address; City; State; Zip Code 7322 S W Freeze State 470		\$625.00	
	Houston, TX 77074			_
			· ·	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/19/2007	Contributor address; City; State; Zip Code 11999 Katy Freeway Suite 340 Houston, TX 77079		\$2,500.00	
			-	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/03/2007	Contributor address; City; State; Zip Code 6100 Hillcroft Suite 710 Houston, TX 77081		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	±)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2007	Contributor address; City; State; Zip Code PO Box 549 Rephares TV 77593		\$2,500.00	
	Rosharon, TX 77583			-
Dringing accom	postion / Joh title (Coe Instructions)	Employer /Cos Is	<u> </u>	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	SUUCTIONS)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 14	/23 Report: 16/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Klotz, D Wayne	<u>:)</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/05/2007	6 Contributor address; City; State; Zip Code 1160 Dairy Ashford Suite 500 Houston, TX 77079		\$5,000.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/09/2007	Contributor address; City; State; Zip Code 1 Riverway Suite 2500 Houston, TX 77056		\$250.00	
			//f top	I T
Principal occur	pation / Job title (See Instructions)	Employer (See In	l -	Texas, complete Schedule T)
о.ра. осоар	(a.a., 655 a.a. (655 a.a. 655)			
Date	Full name of contributor	<u>:)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/10/2007	Contributor address; City; State; Zip Code 2925 Briarpark Drive Houston, TX 77042		\$1,250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/17/2007	Contributor address; City; State; Zip Code 2501 Central Parkway Suite A3 Tomball, TX 77092		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/12/2007	Contributor address; City; State; Zip Code 800 Peakwood 8B Houston, TX 77090		\$250.00	
	11003011, 17/1/030		(If traval autaida -f	Toyas complete Schodule T\
Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
. , 2334	,	, -, (-,	

The Instruction Guide explains how to complete this form.	1 PAGE # Schedule: 15/23 Report: 17/127
2 FILER NAME Eversole, Gerald	3 ACCOUNT # (Ethics Commission filers) 01080801
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID# Lentz, Alfred	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
07/21/2007 6 Contributor address; City; State; Zip Code 5703 Rockland Pearland, TX 77584	\$2,500.00
	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor out-of-state PAC (ID# Leus, Kurt) Amount of In-kind contribution contribution (\$) description (if applicable)
07/11/2007 Contributor address; City; State; Zip Code 5650 Guhn Road Suite 118 Houston, TX 77040	\$5,000.00
	// // // // // // // // // // // // //
Principal occupation / Job title (See Instructions)	(If travel outside of Texas, complete Schedule T) Employer (See Instructions)
	Employer (occ instructions)
Date Full name of contributor out-of-state PAC (ID# McConnell, Andrew) Amount of In-kind contribution contribution (\$) description (if applicable)
07/16/2007 Contributor address; City; State; Zip Code 21020 Park Row Katy, TX 77449	\$2,500.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor out-of-state PAC (ID# McDaniel, Terry) Amount of In-kind contribution contribution (\$) description (if applicable)
07/09/2007 Contributor address; City; State; Zip Code 5225 Katy Freeway Suite 400 Houston, TX 77007	\$2,500.00 I
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor	Amount of In-kind contribution contribution (\$) description (if applicable)
O7/05/2007 Contributor address; City; State; Zip Code PO Box 549 Temple, TX 76503	\$2,500.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 16	/23 Report: 18/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# McNair, Robert)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/17/2007	6 Contributor address; City; State; Zip Code 2 Reliant Park Reliant Stadium Houston, TX 77054-1573		\$2,500.00	 - -
_				`	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2007	Contributor address; City; State; Zip Code 950 Lehman Houston, TX 77018		\$300.00	
		,			·
	Dringing again	otion / Job title (Coe Instructions)	Employer (Cools	•	Texas, complete Schedule T)
	Рипсіраї оссир	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/11/2007	Contributor address; City; State; Zip Code 12121 Wickchester Lane Suite 200 Houston, TX 77079		\$2,500.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/12/2007	Contributor address; City; State; Zip Code 9 Greenway Plaza Suite 2900 Houston, TX 77046		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/22/2007	Contributor address; City; State; Zip Code 9800 Richmond Avenue Suite 400 Houston, TX 77042		\$5,000.00	
_				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 17	7/23 Report: 19/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Montgomery, Rick)	7 Amount of contribution (\$)	8
07/30/2007	6 Contributor address; City; State; Zip Code 450 Gears Road Suite 200 Houston, TX 77067		\$2,500.00	
			·	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/03/2007	Contributor address; City; State; Zip Code 16210 Rolling View Trail Cypress, TX 77433		\$5,000.00	
	37			·
Principal occur	pation / Job title (See Instructions)	Employer (See In:	`	Texas, complete Schedule T)
Fillicipal occup	, , , ,		structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/06/2007	Contributor address; City; State; Zip Code 3355 W Alabama Suite 200 Houston, TX 77098		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/03/2007	Contributor address; City; State; Zip Code 10777 Westheimer Rd Suite 400 Houston, TX 77042-3455		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2007	Contributor address; City; State; Zip Code 12121 Wickchester Lane Suite 200 Houston, TX 77079		\$2,500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	action / Job title (See Instructions)	Employer (See In:	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18	/23 Report: 20/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Othon, F William)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/20/2007	6 Contributor address; City; State; Zip Code 11111 Wilcrest Green Suite 128 Houston, TX 77042		\$1,250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 9801 Westheimer Suite 500 Houston, TX 77042		\$5,000.00	
				(If traval autoida of	Toyon complete Schodule T\
	Dringing coup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	Рппсіраї оссир	ation 7 Job title (See Instructions)	Employer (See in	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/15/2007	Contributor address; City; State; Zip Code 2505 Park Avenue Pearland, TX 77581		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 13333 Northwest Freeway Suite 150 Houston, TX 77040		\$1,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/17/2007	Contributor address; City; State; Zip Code 5555 West Loop South Suite 400 Bellaire, TX 77401		\$2,500.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	,
			. , .	•	

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 19	/23 Report: 21/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Raba-Kistner PAC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/10/2007	6 Contributor address; City; State; Zip Code 1001 Congress Avenue Suite 260 Austin, TX 78701		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/18/2007	Contributor address; City; State; Zip Code 608 Harborside Way Kemah, TX 77565		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/10/2007	Contributor address; City; State; Zip Code 11606 Shady Grove Lane Houston, TX 77024		\$1,250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete ochedule 1)
		·		,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/03/2007	Contributor address; City; State; Zip Code PO Box 22738 Houston, TX 77227-2738		\$1,250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/24/2007	Contributor address; City; State; Zip Code 701 Shepherd Dr Suite 200 Houston, TX 77007		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

SCHEDULE A

-	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 20	/23 Report: 22/127
2 F	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Sander, Dennis	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
0	7/02/2007	6 Contributor address; City; State; Zip Code 10555 Richmond Avenue Suite 100 Houston, TX 77042		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
9 F	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	7/18/2007	Contributor address; City; State; Zip Code 19500 Park Row Suite 100 Houston, TX 77084		\$2,500.00	
				(If travel outside of	Texas, complete Schedule T)
F	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	7/06/2007	Contributor address; City; State; Zip Code 1815 West 14th Street Houston, TX 77008		\$500.00	
				(If traval outside of	Texas, complete Schedule T)
F	Principal occup	ation / Job title (See Instructions)	Employer (See In	,	Texas, complete schedule 1)
		· · ·		,	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	7/10/2007	Contributor address; City; State; Zip Code 4877 Langfield Houston, TX 77040		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
F	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	8/08/2007	Contributor address; City; State; Zip Code 28 Whitworth Way Sugarland, TX 77479-2925		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
F	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

SCHEDULE A

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/23 Report: 23/127
2	FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Spinks, Melvin)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/17/2007	6 Contributor address; City; State; Zip Code 11821 Telge Road Cypress, TX 77429-3288		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/17/2007	Contributor address; City; State; Zip Code 17171 Park Row Suite 160 Houston, TX 77084		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2007	Contributor address; City; State; Zip Code 2 Heritage Court Houston, TX 77024		\$2,500.00	
				,	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In: Retired	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/11/2007	Contributor address; City; State; Zip Code 1970 Welch St Houston, TX 77019-6196		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/05/2007	Contributor address; City; State; Zip Code 2201 Timberloch Place The Woodlands, TX 77380		\$2,500.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	1	

The	NSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 22	/23 Report: 24/127
2 FILE	ER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 D	ate	5 Full name of contributor ☐ out-of-state PAC (ID# Thompson, R Carla)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/0	02/2007	6 Contributor address; City; State; Zip Code 10497 Town & Counrty Way Suite 550 Houston, TX 77024		\$5,000.00	 - -
				,	Texas, complete Schedule T)
9 Prin	cipal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	
D	ate	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/1	15/2007	Contributor address; City; State; Zip Code 3300 S Gessner Suite 100 Houston, TX 77063		\$5,000.00	1
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See In:	structions)		
D	ate	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/1	13/2007	Contributor address; City; State; Zip Code 2925 Briarpark Suite 275 Houston, TX 77042		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
Prin	cipal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
D	ate	Full name of contributor uut-of-state PAC (ID# Vickery, Dennis)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/1	19/2007	Contributor address; City; State; Zip Code 7904 N Sam Houston Pkwy West Suite 400 Houston, TX 77064		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
Prin	cipal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
D	ate	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/1	17/2007	Contributor address; City; State; Zip Code 701 Pennsylvania Ave NW Suite 590 Washington, DC 20004		\$1,000.00	
				(If travel outside of	Texas, complete Schedule T)
Prin	cipal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

			1 PAGE#	
I ne Instructio	on Guide explains how to complete this form.		_	/23 Report: 25/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT#	(Ethics Commission filers)
			01080801	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# White, Brad)	7 Amount of contribution (\$)	8
07/01/2007	6 Contributor address; City; State; Zip Code 6117 Richmond Ave Suite 100 Houston, TX 77057		\$250.00	
O Dringing League	potion / Job title (Coe Instructions)	40 Employer (Cools	l -	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/17/2007	Contributor address; City; State; Zip Code 4900 Woodway Suite 815 Houston, TX 77056-1809		\$500.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/15/2007	Contributor address; City; State; Zip Code 1616 S Voss Road Suite 618 Houston, TX 77057		\$5,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/19/2007	Contributor address; City; State; Zip Code 3033 Chimney Rock Suite 630 Houston, TX 77056		\$5,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/9	7 Report: 26/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Academy			7 Amount (\$)
08/08/2007	6 Payee address; City; State; Zip Code 9805 FM 1960 Bypass West Rd Humble, TX 77338			\$119.02
required.)		9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
Attendance	eciation Road & Bridge Crew Perfect f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
5 /				Ι .
Date	Payee name Academy			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code 9805 FM 1960 Bypass West Rd Humble, TX 77338			\$100.00
Purpose of pay required.)	ment (See instructions regarding type of information	Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder
Office:Staff Appr	eciation Door Prize for Precinct 4 Christmas			
Party (Gift Card) (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Adidas Golf.com			Amount (\$)
08/20/2007	Payee address; City; State; Zip Code			\$510.00
	5545 Fermi Court Carlsbad, CA 92008			
Purpose of pay required.)	/ment (See instructions regarding type of information	Candidate / Officehol		efit Candidate/Officeholder
Office:Staff Appr Employee Golf D	eciation Donation of Equipment for Precinct 4 Pay	Office sought:		
(It	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Ad-Link			Amount (\$)
10/22/2007	Payee address; City; State; Zip Code PO Box 3330 Baytown, TX 77520			\$1,500.00
required.)	/ment (See instructions regarding type of information	Candidate / Officehol		fit Candidate/Officeholder **
	ns:T-Shirts T-Shirts for Senior Olympics Event f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(I)	i iravei outside or Texas, complete Schedule 1) 🔲 📗	Office neta:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/9	7 Report: 27/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Albemarle County Convention and Visitors Bu	ıreau		7 Amount (\$)
07/13/2007	6 Payee address; City; State; Zip Code			\$30.00
	610 East Main Street Charlottesville, VA 22902			
8 Purpose of pay required.) (See travel info of	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Albert Miller Florist & Gifts			Amount (\$)
08/06/2007	Payee address; City; State; Zip Code 544 Waugh Dr			\$280.66
	Houston, TX 77219			
Purpose of pay required.) Office:Decoration	ment (See instructions regarding type of information	Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder ••
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Albert Miller Florist & Gifts			Amount (\$)
12/04/2007	Payee address; City; State; Zip Code 544 Waugh Dr			\$67.66
	Houston, TX 77219			
Purpose of pay required.) Office:Decoration	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Arne's			(\$)
10/26/2007	Payee address; City; State; Zip Code			\$88.35
	2830 Hicks St Houston, TX 77007			
required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder
Office:Staff Appr Party	eciation Downtown Office Staff Christmas	Office county		
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 3/97	7 Report: 28/127
2 FILER NAME	Eversole, Gerald	3	01080801	(Ethics Commission filers)
4 Date	5 Payee name Arturo's Uptown	1		7 Amount (\$)
07/15/2007				\$98.27
	6 Payee address; City; State; Zip Code 1180 Uptown Park Blvd Ste 1			·
	Houston, TX 77056			
8 Purpose of pay required.)	ment (See instructions regarding type of information	9 ** Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Office:Staff Meal	s			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
07/02/2007	Payee address; City; State; Zip Code			\$28.58
	PO Box 630047			
	Dallas, TX 75263			
	ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder
required.) Internet Commu	nications:Internet Service	Candidate / Officeriolde	er name.	
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	AT&T			(\$)
07/16/2007	Payee address; City; State; Zip Code			\$60.59
	PO Box 630047			
	Dallas, TX 75263			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e	expenditure to bene	fit Candidate/Officeholder **
Office:Phone Se	rvice	Candidate / Officeriolde	name.	
(Ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name		1	Amount
Date	AT&T			(\$)
07/17/2007	Payee address; City; State; Zip Code			\$196.20
	PO Box 630047 Dallas, TX 75263			
	Dailas, TA 10200			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct e.		fit Candidate/Officeholder ••
Office:Phone Se	rvice	Janaidate / Officeriolde	n namo.	
/14	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(II	traver dataide or rexas, complete ochedule 1)	Office field.		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/9	7 Report: 29/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name AT&T			7 Amount (\$)
08/10/2007	6 Payee address; City; State; Zip Code			\$28.58
	PO Box 630047 Dallas, TX 75263			
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
Internet Commu	nications:Internet Service			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code			\$60.59
	PO Box 630047 Dallas, TX 75263			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
Office:Phone Se	rvice			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
08/29/2007	Payee address; City; State; Zip Code			\$152.12
	PO Box 630047 Dallas, TX 75263			
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
Office:Phone Se	rvice			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
09/07/2007	Payee address; City; State; Zip Code			\$28.58
	PO Box 630047 Dallas, TX 75263			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
Internet Commu	nications:Internet Service			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 2.2.4

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 5/9	7 Report: 30/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name AT&T			7 Amount (\$)
09/10/2007	6 Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$60.59
	,			
8 Purpose of pay required.) Office:Phone Se	ment (See instructions regarding type of information rvice	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
09/13/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$28.58
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct	t expenditure to bene	fit Candidate/Officeholder
Internet Communications:Internet Service		Candidate / Cincerior	del fiame.	
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
09/13/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$28.58
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder
Internet Commu	nications:Internet Service	Office cought		
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
09/19/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$303.52
Purpose of pay required.) Office:Phone Se	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	I	PAGE # Schedule: 6/97	' Report: 31/127
2 FILER NAME	Eversole, Gerald		ACCOUNT # 0 01080801	(Ethics Commission filers)
4 Date	5 Payee name AT&T	•		7 Amount (\$)
10/14/2007	6 Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$60.59
8 Purpose of pay required.) Office:Phone Se	ment (See instructions regarding type of information	9 · · Complete if direct exp Candidate / Officeholder r	penditure to benefiname:	it Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
10/22/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$3.21
Purpose of pay required.) Office:Phone Se	/ment (See instructions regarding type of information	Complete if direct exp Candidate / Officeholder r		it Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
11/07/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$60.59
Purpose of pay required.) Office:Phone Se	ment (See instructions regarding type of information	** Complete if direct exp Candidate / Officeholder r	penditure to benefiname:	it Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T			Amount (\$)
11/07/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263			\$155.21
Purpose of pay required.) Office:Phone Se	/ment (See instructions regarding type of information	Complete if direct exp Candidate / Officeholder r		it Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
-		·		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		AGE # chedule: 7/97 Report: 32/127	
2 FILER NAME	Eversole, Gerald		CCOUNT # (Ethics Commission filers) 1080801	
4 Date	5 Payee name AT&T		7 Amount (\$)	
12/06/2007	6 Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263		\$28.58	
required.)	yment (See instructions regarding type of information nications:Internet Service	9 · · Complete if direct expen Candidate / Officeholder nar	nditure to benefit Candidate/Officeholder •• me:	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name AT&T		Amount (\$)	
12/15/2007	Payee address; City; State; Zip Code PO Box 630047 Dallas, TX 75263		\$153.15	
Purpose of pay required.) Office:Phone Se	yment (See instructions regarding type of information	** Complete if direct expen Candidate / Officeholder nar	nditure to benefit Candidate/Officeholder ** me:	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Avis Rent a Car		Amount (\$)	
07/12/2007	Payee address; City; State; Zip Code 7923 W Broad St Richmond, VA 23229		\$329.47	
Purpose of pay required.) (See travel info of	yment (See instructions regarding type of information on Schedule T)	** Complete if direct expen Candidate / Officeholder nar	nditure to benefit Candidate/Officeholder •• me:	
` (I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Azuma		Amount (\$)	
07/11/2007	Payee address; City; State; Zip Code 909 Texas Ste E Houston, TX 77002		\$64.43	ı
Purpose of pay required.) Office:Staff Mea	yment (See instructions regarding type of information	** Complete if direct expen Candidate / Officeholder nar	nditure to benefit Candidate/Officeholder •• me:	
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

SCHEDULE F

1-800-325-8506

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 8/9	7 Report: 33/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Barbecue Inn			7 Amount (\$)
09/07/2007	6 Payee address; City; State; Zip Code			\$36.63
	116 W Crosstimbers Houston, TX 77018			
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Be An Angel Fund Inc			Amount (\$)
08/01/2007	Payee address; City; State; Zip Code			\$100.00
	2003 Aldine Bender Houston, TX 77032			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct	t expenditure to bene der name:	efit Candidate/Officeholder
Public Promotion:Sponsorship				
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name BEAResource For CPS Kids			Amount (\$)
11/09/2007	Payee address; City; State; Zip Code			\$830.00
	PO Box 27701-501 Houston, TX 77227			
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder
Public Promotion	sponsorsnip 	Office sought:		
(l	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Ben's Chuck Wagon			Amount (\$)
12/14/2007	Payee address; City; State; Zip Code			\$580.39
	4104 Polak Rd Wallis, TX 77485			
required.)	/ment (See instructions regarding type of information eciation Lyons Camp Perfect Attendance	Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
Lunch		Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/9	7 Report: 34/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Best Buy			7 Amount (\$)
12/07/2007	6 Payee address; City; State; Zip Code			\$100.00
	1550 Lake Woodlands Dr The Woodlands, TX 77380			
required.)	ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Bibas Greek Pizza			Amount (\$)
07/11/2007	Payee address; City; State; Zip Code			\$23.91
	5526 Memorial Dr Houston, TX 77007			
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
Office:Staff Meals (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Black Eyed Pea			Amount (\$)
07/09/2007	Payee address; City; State; Zip Code			\$21.18
	2005 FM 1960 Rd W Houston, TX 77090			
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	s f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
Date	Black Eyed Pea			(\$)
07/09/2007	Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090			\$48.86
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(1)	traver eatering or results, complete echedule 1)	Office field.		

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/9	97 Report: 35/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Black Eyed Pea			7 Amount (\$)
07/13/2007	6 Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090		,	\$26.69
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Black Eyed Pea			Amount (\$)
08/06/2007	Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090			\$26.36
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Black Eyed Pea			Amount (\$)
08/20/2007	Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090			\$25.50
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene lder name:	fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Black Eyed Pea			Amount (\$)
09/10/2007	Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090			\$25.50
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Complete if direction Candidate / Officehol		efit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	•	PAGE # Schedule: 11/9	97 Report: 36/127
2 FILER NAME	Eversole, Gerald	(3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Black Eyed Pea			7 Amount (\$)
09/24/2007	6 Payee address; City; State; Zip Code 2005 FM 1960 Rd W Houston, TX 77090			\$25.01
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct of Candidate / Officehold		fit Candidate/Officeholder
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Blakemore & Associates			Amount (\$)
12/27/2007	Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046			\$10,000.00
required.)	yment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
Consulting Fees	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Blakemore & Associates			Amount (\$)
12/27/2007	Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046			\$5,000.00
Purpose of pay required.) Consulting Fees	yment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Bookout, Amy			Amount (\$)
07/13/2007	Payee address; City; State; Zip Code 1117 Bel Air Dr Allen, TX 75013			\$450.00
Purpose of pay required.) Employee Comp	yment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/9	97 Report: 37/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Bookout, Amy			7 Amount (\$)
08/10/2007	6 Payee address; City; State; Zip Code			\$450.00
	1117 Bel Air Dr Allen, TX 75013			
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Employee Comp	ensation:Payroll			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Bookout, Amy			Amount (\$)
09/10/2007	Payee address; City; State; Zip Code			\$450.00
	1117 Bel Air Dr Allen, TX 75013			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder
Employee Comp	ensation:Payroll			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Bookout, Amy			Amount (\$)
10/12/2007	Payee address; City; State; Zip Code			\$450.00
	1117 Bel Air Dr Allen, TX 75013			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Employee Comp	ensation:Payroll			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount (\$)
	Bookout, Amy			(Φ)
11/14/2007	Payee address; City; State; Zip Code			\$450.00
	1117 Bel Air Dr			
	Allen, TX 75013			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Employee Comp	ensation:Payroll			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/9	97 Report: 38/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Bookout, Amy			7 Amount (\$)
12/10/2007	6 Payee address; City; State; Zip Code			\$450.00
	1117 Bel Air Dr Allen, TX 75013			
8 Purpose of pay required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder **
Employee Comp	ensation:Payroll			
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Boy Scout Troop 878			Amount (\$)
09/19/2007	Payee address; City; State; Zip Code			\$100.00
	5920 FM 2920 Spring, TX 77389			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Boy Scouts Of America			Amount (\$)
12/15/2007	Payee address; City; State; Zip Code			\$83.00
	PO Box 924528 Houston, TX 77292			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct	expenditure to bene ler name:	fit Candidate/Officeholder **
Public Promotion	n:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Brand IQ			Amount (\$)
07/23/2007	Payee address; City; State; Zip Code			\$13,496.20
	903 Gemini Houston, TX 77058			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Promotional Item Breakfast	ns:Logoed Items Ceramic Mugs for Eversole	Office sought:		
(ii	f travel outside of Texas, complete Schedule T)	Office sought. Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 14/	97 Report: 39/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Carter's Country			7 Amount (\$)
09/14/2007	6 Payee address; City; State; Zip Code			\$250.91
	8925 Katy Freeway Houston, TX 77024			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Attendance	eciation Road & Bridge Camp Perfect f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Casa Ole			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code			\$18.38
	20131 Hwy 59 N Ste 2004 Houston, TX 77338			
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
Office:Staff Meals (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Chad Hedrick Foundation			Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 20622 Fairway Meadow Lane			\$500.00
	Spring, TX 77379			
Purpose of pay required.) Public Promotion	ment (See instructions regarding type of information	Candidate / Officehol		efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Champs Sports			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code			\$12.53
	7925 FM 1960 Rd W Houston, TX 77070			
required.)	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		I efit Candidate/Officeholder
Office:Staff Appr	eciation Gift for Precinct 4 Employee	Office cought:		
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		PAGE # Schedule: 15/9	97 Report: 40/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Chastang's Bayou City Food	1		7 Amount (\$)
09/19/2007	6 Payee address; City; State; Zip Code			\$425.00
	8314 Maria Edna Houston, TX 77037			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct of Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder **
Political Promotion BBQ Cookoff	on:Meals The Arabian Knights Trail Ride &	Office sought:		
(If travel outside of Texas, complete Schedule T) Office held:				
Date	Payee name Colonial Williamsburg Visitor Center			Amount (\$)
07/15/2007	Payee address; City; State; Zip Code			\$62.00
	1 Visitor Center Dr Williamsburg, VA 23185			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		fit Candidate/Officeholder ••
(See travel info	on Schedule T)	0.00		
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Cruisin' USA			Amount (\$)
10/25/2007	Payee address; City; State; Zip Code			\$60.70
	6262 Olive Blvd St Louis, MO 63130			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		efit Candidate/Officeholder
Office:Staff Appr Party	eciation Downtown Office Staff Christmas			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Custom Built Awards			Amount (\$)
4.4/0.0/0.007	Custom Built Awards			
11/08/2007	Payee address; City; State; Zip Code 4451 FM 1960 E			\$87.84
	Humble, TX 77346			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		L fit Candidate/Officeholder
	on:Entertainment Trophies for Octo"Bear"	Januard / Jinonida		
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3 3 4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/9	97 Report: 41/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Cypresswood Golf Club	•		7 Amount (\$)
09/10/2007	6 Payee address; City; State; Zip Code 21602 Cypresswood Drive Spring, TX 77373			\$80.44
required.)	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
	on:Meals Luekemia Society Meeting	Office sought:		
(If travel outside of Texas, complete Schedule T) Office held:				
Date	Payee name David Bray Photography			Amount (\$)
08/09/2007	Payee address; City; State; Zip Code 4212 San Felipe Ste 398 Houston, TX 77027			\$465.48
Purpose of pay required.) Photography	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name David Bray Photography			Amount (\$)
08/13/2007	Payee address; City; State; Zip Code 4212 San Felipe Ste 398 Houston, TX 77027			\$211.09
Purpose of pay required.) Photography	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene der name:	efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Dell			(\$)
10/20/2007	Payee address; City; State; Zip Code			\$74.69
	1 Dell Way Round Rock, TX 78682			
required.)	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder
Office:Computer	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
,	.,			Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/9	97 Report: 42/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Dell			7 Amount (\$)
10/20/2007	6 Payee address; City; State; Zip Code 1 Dell Way Round Rock, TX 78682			\$647.34
8 Purpose of pay required.) Office:Computer	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
•	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$13.52
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$13.59
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$12.87
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		AGE # Schedule: 18/9	7 Report: 43/127
2 FILER NAME	Eversole, Gerald		CCOUNT# (11080801	Ethics Commission filers)
4 Date	5 Payee name Denny's	•		7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code			\$14.03
	6920 FM 1960 Rd E Humble, TX 77346			
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · Complete if direct expe Candidate / Officeholder na		it Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E			\$13.57
	Humble, TX 77346			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direct expe Candidate / Officeholder na		it Candidate/Officeholder ••
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$11.59
Purpose of nav	ment (See instructions regarding type of information	• Complete if direct eyne	nditure to benef	it Candidate/Officeholder ••
required.) Office:Staff Meal	, , , , , , , , , , , , , , , , , , , ,	Candidate / Officeholder na	ame:	it Garialadio/Gillochidadi
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E			\$14.23
	Humble, TX 77346			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Candidate / Officeholder na		it Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3.3.4

SCHEDULE F

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/9	97 Report: 44/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Denny's			7 Amount (\$)
11/05/2007	6 Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$7.29
8 Purpose of pay required.) Office:Staff Meal	rment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Denny's			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 6920 FM 1960 Rd E Humble, TX 77346			\$13.59
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Deputy Pete Cupial Memorial Fund			Amount (\$)
10/15/2007	Payee address; City; State; Zip Code 1400 Franklin St Houston, TX 77002			\$100.00
required.)	/ment (See instructions regarding type of information a:Sponsorship BBQ Benefit for Deputy Pete	** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Cupial	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Dillard's			Amount (\$)
07/09/2007	Payee address; City; State; Zip Code 20131 Highway 59 North Ste 2000 Humble, TX 77338			\$50.00
required.)	/ment (See instructions regarding type of information eciation Gift Card for Employee Drawing	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/	97 Report: 45/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Dollar Tree Stores Inc			7 Amount (\$)
11/01/2007	6 Payee address; City; State; Zip Code 10261 I 45 North Ste 100 Houston, TX 77037			\$12.99
required.)	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehole		fit Candidate/Officeholder **
Party	eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Doss Community Center			Amount (\$)
09/07/2007	Payee address; City; State; Zip Code 2500 Frick Rd Houston, TX 77038			\$2,500.00
required.)	ment (See instructions regarding type of information	Complete if direct		ofit Candidate/Officeholder **
Public Promotion:Sponsorship				
(H	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Ed Emmett Campaign			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code 5518 Chaucer Dr Ste A Houston, TX 77005			\$1,000.00
Purpose of pay required.) Political Promotic	ment (See instructions regarding type of information	Complete if direct Candidate / Officehole		efit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Edwin Watts Golf			(\$)
07/21/2007	Payee address; City; State; Zip Code 5395 Westheimer Houston, TX 77056			\$249.98
required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder
Military Veterans	nt Appreciation Donation of Equipment to f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
ν	,			

1-800-325-8506

POLITICAL EXPENDITURES

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/9	97 Report: 46/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Edwin Watts Golf			7 Amount (\$)
09/06/2007	6 Payee address; City; State; Zip Code			\$981.76
	5395 Westheimer Houston, TX 77056			
required.)	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene ler name:	efit Candidate/Officeholder **
Office:Constituer Military Veterans	nt Appreciation Donation of Equipment to			
(If travel outside of Texas, complete Schedule T) Office sought: Office held:				
Date	Payee name Elves & More			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code			\$100.00
	5161 San Felipe Ste 320 Houston, TX 77056			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Events Gifts			Amount (\$)
08/24/2007	Payee address; City; State; Zip Code			\$120.16
	1966 West Gray Houston, TX 77019			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder ••
Public Promotion	n:Flowers & Gifts:Constituent Picture Frame			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Exxon Mobil			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code			\$3.01
	1 Florida Ave NE Washington, DC 20002			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder ••
(See travel info	on Schedule T)			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 2.2.4

SCHEDULE F

1-800-325-8506

The Instruction	סא Guide explains how to complete this form.		1 PAGE # Schedule: 22/9	97 Report: 47/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Exxon Mobil			7 Amount (\$)
08/04/2007	6 Payee address; City; State; Zip Code			\$67.00
	1 Florida Ave NE Washington, DC 20002			
8 Purpose of pay required.)	ment (See instructions regarding type of information	9 * Complete if direct Candidate / Officehold		efit Candidate/Officeholder ••
(See travel info	on Schedule T)			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Exxon Mobil			Amount (\$)
09/21/2007	Payee address; City; State; Zip Code			\$59.04
	1 Florida Ave NE Washington, DC 20002			
	yment (See instructions regarding type of information			I fit Candidate/Officeholder
required.) (See travel info	on Schedule T)	Candidate / Officehold	ier name.	
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Exxon Mobil			Amount (\$)
	EXXON MODII			(Ψ)
09/22/2007	Payee address; City; State; Zip Code			\$36.50
	1 Florida Ave NE Washington, DC 20002			
Purpose of pay required.)	yment (See instructions regarding type of information	Candidate / Officehold		fit Candidate/Officeholder **
(See travel info	on Schedule T)			
(I	f travel outside of Texas, complete Schedule T) 🗵	Office sought: Office held:		
Date	Payee name			Amount
	Federal Express Kinko's			(\$)
07/18/2007	Payee address; City; State; Zip Code			\$63.91
	5616 Westheimer Houston, TX 77056			
required.)	yment (See instructions regarding type of information	Candidate / Officehold		fit Candidate/Officeholder ••
Fundraising:Sup	plies Supplies for Eversole Breakfast	055		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	סא Guide explains how to complete this form.		1 PAGE # Schedule: 23/	97 Report: 48/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Finish Line			7 Amount (\$)
07/23/2007	6 Payee address; City; State; Zip Code			\$238.10
	20131 Highway 59 N Ste 2346 Humble, TX 77338			
required.)	yment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
Employee Golf D	reciation Donation of Equipment for Precinct 4 Day f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	•	Cinico ficia.		
Date	Payee name Fleming's Prime Steakhouse & Wine Bar			Amount (\$)
09/08/2007	Payee address; City; State; Zip Code			\$442.31
	2405 West Alabama Houston, TX 77098			
required.)	yment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Office:Staff Meals Downtown Staff Meeting				
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Fleming's Prime Steakhouse & Wine Bar			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code			\$10.00
	2405 West Alabama Houston, TX 77098			
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
Office:Parking (S	Staff Meal)			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Fogo Ded Chao Churrascaria			Amount (\$)
07/10/2007	Payee address; City; State; Zip Code			\$137.50
	8250 Westheimer Houston, TX 77063			
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Office:Staff Mea	ls			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 24/	97 Report: 49/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Friends Of Kent Adams			7 Amount (\$)
11/20/2007	6 Payee address; City; State; Zip Code PO Box 73347 Houston, TX 77273			\$1,000.00
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
Political Promotio	on:Sponsorsnip f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Friends Of National Rifle Association			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code 2002 Lazy Grove Kingwood, TX 77339			\$70.00
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder **
Public Promotion:Sponsorship				
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Friends Of St Theresa			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code PO Box 70516 Houston, TX 77270			\$200.00
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Political Promotio	on:Sponsorship f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
`	. ,			T .
Date	Payee name Friends Of The Atascocita Library			Amount (\$)
11/26/2007	Payee address; City; State; Zip Code 19520 Pinhurst Trail Dr Humble, TX 77346			\$2,000.00
Purpose of pay required.) Public Promotion	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 25/9	97 Report: 50/127
2 FILER NAME	Eversole, Gerald	3	ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Gabby's BBQ-Catering	•		7 Amount (\$)
07/18/2007	6 Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$9.00
Purpose of pay required.) Office:Staff Mea	yment (See instructions regarding type of information	Candidate / Officeholder		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$18.63
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Complete if direct exp Candidate / Officeholder		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$16.02
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct exp Candidate / Officeholder		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$14.00
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Candidate / Officeholder	penditure to bene name:	fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 26/9	97 Report: 51/127
2 FILER NAME	Eversole, Gerald	3	ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Gabby's BBQ-Catering	•		7 Amount (\$)
07/18/2007	6 Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$11.37
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Candidate / Officeholder		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$12.00
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Complete if direct exp Candidate / Officeholder		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$18.10
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct exp Candidate / Officeholder		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Gabby's BBQ-Catering			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 4659 Telephone Rd Houston, TX 77087			\$12.02
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Candidate / Officeholder	penditure to bene name:	fit Candidate/Officeholder ••
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 27/9	97 Report: 52/127
2 FILER NAME	ME Eversole, Gerald 3 ACCOUNT # (I 01080801		(Ethics Commission filers)	
4 Date	5 Payee name Gabby's BBQ-Catering	•		7 Amount (\$)
11/05/2007	11/05/2007 6 Payee address; City; State; Zip Code		\$12.02	
	4659 Telephone Rd Houston, TX 77087			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Office:Staff Meal	S			
(If travel outside of Texas, complete Schedule T) Office sought: Office held:				
Date	Payee name Gander Mountain			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code			\$100.00
	19302 IH 45 Spring, TX 77373			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
Office:Staff Appr Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas			
,	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Garden Ridge			Amount (\$)
				\$108.02
10/26/2007	Payee address; City; State; Zip Code			ψ100.0 <u>2</u>
10/26/2007				ψ100.0 <u>2</u>
Purpose of pay	Payee address; City; State; Zip Code 12605 Gessner Rd	•• Complete if direct 6		fit Candidate/Officeholder **
Purpose of pay required.) Office:Staff Appr	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064			
Purpose of pay required.) Office:Staff Appr Party	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information	•• Complete if direct 6		
Purpose of pay required.) Office:Staff Appr Party	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ••• Amount
Purpose of pay required.) Office:Staff Appr Party	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T)	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ••
Purpose of pay required.) Office:Staff Appr Party	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ••• Amount
Purpose of pay required.) Office:Staff Appr Party (If	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name Garden Ridge	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ** Amount (\$)
Purpose of pay required.) Office:Staff Appr Party (In Date	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name Garden Ridge Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064	** Complete if direct e Candidate / Officeholde Office sought: Office held:	er name:	fit Candidate/Officeholder ** Amount (\$) \$93.33
Purpose of pay required.) Office:Staff Appr Party (In Date 10/26/2007	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name Garden Ridge Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information	** Complete if direct e Candidate / Officeholde Office sought: Office held:	er name:	fit Candidate/Officeholder ** Amount (\$)
Purpose of payrequired.) Office:Staff Appr Party Date 10/26/2007 Purpose of payrequired.) Office:Staff Appr Party	Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064 /ment (See instructions regarding type of information eciation Downtown Office Staff Christmas f travel outside of Texas, complete Schedule T) Payee name Garden Ridge Payee address; City; State; Zip Code 12605 Gessner Rd Houston, TX 77064	** Complete if direct e Candidate / Officeholde Office sought: Office held:	er name:	fit Candidate/Officeholder ** Amount (\$) \$93.33

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 28/9	97 Report: 53/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name George Bush Intercontinental Airport	-		7 Amount (\$)
07/12/2007	6 Payee address; City; State; Zip Code 2800 North Terminal Road Houston, TX 77032			\$6.40
required.)	yment (See instructions regarding type of information	9 · · Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder
(See travel info	on Schedule T)			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name George Bush Intercontinental Airport			Amount (\$)
07/12/2007	Payee address; City; State; Zip Code 2800 North Terminal Road Houston, TX 77032			\$52.00
required.)	yment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
(See travel info	on Schedule I)			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Glass Wall			Amount (\$)
08/14/2007	Payee address; City; State; Zip Code 933 Studewood St Houston, TX 77008			\$225.46
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	* Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
Date	Glass Wall			(\$)
09/26/2007	Payee address; City; State; Zip Code 933 Studewood St Houston, TX 77008			\$245.21
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
\ -	, , , , , , , , , , , , , , , , , , , ,			

The Instruction	סא Guide explains how to complete this form.	1	PAGE # Schedule: 29/9	97 Report: 54/127
2 FILER NAME	IAME Eversole, Gerald 3 ACCOUNT# 01080801			(Ethics Commission filers)
4 Date	5 Payee name Golden Hunan Restaurant	1		7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code			\$25.66
	5801 Memorial Dr Houston, TX 77007			
required.)	yment (See instructions regarding type of information	9 · · Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Office:Staff Mea	_	Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Golf Etc			Amount (\$)
08/17/2007	Payee address; City; State; Zip Code			\$406.08
	20040 Hwy 59 N Humble, TX 77338			
required.)	yment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
Office:Staff Appr	reciation Donation of Equipment for Precinct 4			
Employee Golf D	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Golf Galaxy			Amount (\$)
07/17/2007	Payee address; City; State; Zip Code			\$98.43
	5078 Richmond Ave Houston, TX 77056			
Durnoss of no	yment (See instructions regarding type of information	** Complete if direct a	vnenditure to been	fit Candidate/Officeholder
required.)	reciation Donation of Equipment for Precinct 4	Candidate / Officeholde		iii Candidate/Onicendidei
Employee Golf D	Day f travel outside of Texas, complete Schedule T)	Office sought:		
(I	i traver outside of Texas, complete Schedule 1)	Office held:		
Date	Payee name Golf Galaxy			Amount (\$)
07/22/2007	Payee address; City; State; Zip Code			\$302.98
	5078 Richmond Ave Houston, TX 77056			
Purpose of pay required.)	yment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Office:Staff Appr Employee Golf D	eciation Donation of Equipment for Precinct 4 Day	Office sought:		
		- ··· g·····		

The Instruction Guide explains how to complete this form.		PAGE # Schedule: 30/	97 Report: 55/127	
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Golf Galaxy	1		7 Amount (\$)
08/28/2007	6 Payee address; City; State; Zip Code			\$119.03
	5078 Richmond Ave Houston, TX 77056			
8 Purpose of payment (See instructions regarding type of information required.) 9 ** Complete if direct expenditure to bene Candidate / Officeholder name:		fit Candidate/Officeholder **		
Employee Golf D	eciation Donation of Equipment for Precinct 4 Day f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(1	Travel outside of Texas, complete schedule 1)	Office field.		
Date	Payee name Golfers Against Cancer			Amount (\$)
10/15/2007	Payee address; City; State; Zip Code			\$1,000.00
	1700 Lake Kingwood Trail Kingwood, TX 77339			
required.)	/ment (See instructions regarding type of information	Complete if direct candidate / Officehold		fit Candidate/Officeholder **
Public Promotion	n:Sponsorship			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Golfsmith International			Amount (\$)
08/03/2007	Payee address; City; State; Zip Code 10885 Westheimer Rd Houston, TX 77042			\$507.09
required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		efit Candidate/Officeholder **
Employee Golf D	eciation Donation of Equipment for Precinct 4			
, ,	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Golfsmith International			(\$)
08/19/2007	Payee address; City; State; Zip Code 10885 Westheimer Rd			\$520.81
	Houston, TX 77042			
Purpose of pay required.)	/ment (See instructions regarding type of information	Candidate / Officehold		efit Candidate/Officeholder
Office:Staff Appr Employee Golf D	eciation Donation of Equipment for Precinct 4 Day	Office sought:		
(I	f travel outside of Texas, complete Schedule T) 🔲	Office held:		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/97 Report: 56/127	
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Goode Company BBQ	·		7 Amount (\$)
07/22/2007	6 Payee address; City; State; Zip Code 8911 Katy Freeway Houston, TX 77024			\$20.00
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Goode Company BBQ			Amount (\$)
07/29/2007	Payee address; City; State; Zip Code 8911 Katy Freeway Houston, TX 77024			\$14.94
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Goode Company BBQ			Amount (\$)
07/29/2007	Payee address; City; State; Zip Code 8911 Katy Freeway Houston, TX 77024			\$17.48
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Goode Company BBQ			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code 8911 Katy Freeway Houston, TX 77024			\$17.40
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/9	97 Report: 57/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Goode Company BBQ	•		7 Amount (\$)
08/12/2007	6 Payee address; City; State; Zip Code			\$70.90
	8911 Katy Freeway Houston, TX 77024			
8 Purpose of pay required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Staff Meal	s			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Goode Company BBQ			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code			\$12.34
	8911 Katy Freeway Houston, TX 77024			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Office:Staff Meal	s			
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Grand Lux Cafe			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 5000 Westheimer Rd Ste 690 Houston, TX 77056			\$44.32
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
Date	Greater Heights Area Chamber Of Commerce)		(\$)
08/21/2007	Payee address; City; State; Zip Code 545 W 19th St Houston, TX 77008			\$200.00
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3.3.4

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 33/9	97 Report: 58/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Grotto Ristorante	•		7 Amount (\$)
07/06/2007	6 Payee address; City; State; Zip Code			\$60.12
	4715 Westheimer Rd Houston, TX 77027			
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Harris County CPS Fund			Amount (\$)
09/19/2007	Payee address; City; State; Zip Code 2525 Murworth			\$900.00
	Houston, TX 77054			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct	expenditure to bene der name:	efit Candidate/Officeholder ••
Political Promotic	on:Sponsorship			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Harris County Public Infrastructure Departmer	nt		Amount (\$)
07/24/2007	Payee address; City; State; Zip Code			\$72.50
	1001 Preston Avenue 7th Floor Houston, TX 77002			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Office:Office Sup		Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Harris County Public Infrastructure Departmer	nt		Amount (\$)
08/20/2007	Payee address; City; State; Zip Code			\$72.00
	1001 Preston Avenue 7th Floor Houston, TX 77002			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Office:Office Sup	pplies	Office sought:		
(l	f travel outside of Texas, complete Schedule T)	Office held:		

The Instruction Guide explains how to complete this form.		1 PAGE # Schedule: 34/9	97 Report: 59/127	
2 FILER NAME Eversole, Ge	erald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date 5 Payee nam Harris Co	e unty Public Infrastructure Departmer	nt		7 Amount (\$)
11/13/2007 6 Payee add	ress; City; State; Zip Code			\$50.75
1001 Pres	ston Avenue 7th Floor TX 77002			
Purpose of payment (See instrurequired.)	actions regarding type of information	9 · · Complete if direct		fit Candidate/Officeholder
Office:Office Supplies		Carialadio, Cilicoriol	aor riamo.	
(If travel outside	of Texas, complete Schedule T)	Office sought: Office held:		
Date Payee nam Harris Co	le unty Republican Party			Amount (\$)
	ress; City; State; Zip Code mond Ste 218 TX 77098			\$10,000.00
Purpose of payment (See instrured)	actions regarding type of information	Complete if direct		fit Candidate/Officeholder
Political Promotion:Sponsorship)			
(If travel outside	of Texas, complete Schedule T)	Office sought: Office held:		
Date Payee nam Harris Co	e unty Republican Party			Amount (\$)
3311 Rich	ress; City; State; Zip Code amond Ste 218 TX 77098			\$5,000.00
required.)	actions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder
Political Promotion:Sponsorship		Office sought:		
(If travel outside	of Texas, complete Schedule T)	Office held:		
Date Payee nam HEB	e			Amount (\$)
10/18/2007 Payee addi 28520 To Tomball,	mball Parkway			\$387.54
Purpose of payment (See instrurequired.)	uctions regarding type of information	Complete if direct Candidate / Officehold		efit Candidate/Officeholder ••
Public Promotion:Sponsorship Park Grand Opening	Food & Drinks for Spring Creek	Office cought		
(If travel outside	of Texas, complete Schedule T)	Office sought: Office held:		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 35/9	97 Report: 60/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name HEB	,		7 Amount (\$)
10/18/2007	6 Payee address; City; State; Zip Code			\$46.96
	28520 Tomball Parkway			
	Tomball, TX 77375			
8 Purpose of pay required.)	yment (See instructions regarding type of information	9 * Complete if direct of Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder ••
Public Promotion Park Grand Ope	n:Sponsorship Food & Drinks for Spring Creek			
•	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Henderson, Joanye			Amount (\$)
07/13/2007	Payee address; City; State; Zip Code			\$1,569.95
	14502 Fall Creek Crossing Humble, TX 77396			
	Tidilibio, 1X77000			
Purpose of pay required.)	yment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
Employee Comp	ensation:Payroll			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Henderson, Joanye			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code			\$1,569.95
	14502 Fall Creek Crossing Humble, TX 77396			
required.)	yment (See instructions regarding type of information	Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Employee Comp	ensation:Payroll	Office sought:		
(l	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Henderson, Joanye			Amount (\$)
00/05/0007				
09/05/2007	Payee address; City; State; Zip Code 14502 Fall Creek Crossing			\$10,000.00
	Humble, TX 77396			
	yment (See instructions regarding type of information			fit Candidate/Officeholder ••
required.) Employee Comp	ensation:Payroll	Candidate / Officeholde	er name:	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
		C.1100 11010.		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 36/9	97 Report: 61/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Henderson, Joanye	,		7 Amount (\$)
09/10/2007	6 Payee address; City; State; Zip Code 14502 Fall Creek Crossing			\$1,569.95
	Humble, TX 77396			
8 Purpose of pay required.)	yment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehold		efit Candidate/Officeholder
Employee Comp	ensation:Payroll			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Henderson, Joanye			Amount (\$)
10/12/2007	Payee address; City; State; Zip Code			\$1,569.95
	14502 Fall Creek Crossing Humble, TX 77396			
Purpose of pay	yment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Employee Comp	ensation:Payroll			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Henderson, Joanye			Amount (\$)
11/14/2007	Payee address; City; State; Zip Code			\$1,569.95
	14502 Fall Creek Crossing Humble, TX 77396			
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
Employee Comp	ensation:Payroll	Office accepts		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Doto	Payee name			Amount
Date	l '			
Date	Henderson, Joanye			(\$)
12/10/2007	Henderson, Joanye Payee address; City; State; Zip Code			
	Henderson, Joanye			(\$)
12/10/2007	Henderson, Joanye Payee address; City; State; Zip Code 14502 Fall Creek Crossing Humble, TX 77396		expenditure to bene	(\$) \$1,569.95
12/10/2007 Purpose of payrequired.)	Henderson, Joanye Payee address; City; State; Zip Code 14502 Fall Creek Crossing Humble, TX 77396 yment (See instructions regarding type of information			(\$)
Purpose of parrequired.) Employee Comp	Henderson, Joanye Payee address; City; State; Zip Code 14502 Fall Creek Crossing Humble, TX 77396 yment (See instructions regarding type of information	· · Complete if direct		(\$) \$1,569.95

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/9	97 Report: 62/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Hillco Partners			7 Amount (\$)
12/31/2007	6 Payee address; City; State; Zip Code 823 Congress Ave Ste 900 Austin, TX 78701			\$10,000.00
8 Purpose of pay required.) Consulting Fees	yment (See instructions regarding type of information	9 · · Complete if direc Candidate / Officehol		fit Candidate/Officeholder ••
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Houston Junior Woman's Club Charitable Fun	nd		Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 2103 Lakeside Bend Ct Houston, TX 77077			\$275.00
Purpose of pay required.) Print Advertising	yment (See instructions regarding type of information :Placement	Candidate / Officehol	t expenditure to bene lder name:	efit Candidate/Officeholder ••
-	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Houston Museum Of Natural Science			Amount (\$)
07/12/2007	Payee address; City; State; Zip Code 1 Hermann Circle Drive Houston, TX 77030		,	\$65.19
Purpose of pay required.) Public Promotion	yment (See instructions regarding type of information	** Complete if direc Candidate / Officehol	t expenditure to bene lder name:	fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Houston Northwest Memorial Chamber Of Co	mmerce		Amount (\$)
09/28/2007	Payee address; City; State; Zip Code 14511 Falling Creek Dr Ste 205 Houston, TX 77014			\$300.00
Purpose of pay required.) Public Promotion	yment (See instructions regarding type of information n:Sponsorship	** Complete if direc Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 38/9	97 Report: 63/127
2 FILER NAME	Eversole, Gerald	3	ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Houston Wilderness	1		7 Amount (\$)
11/07/2007	6 Payee address; City; State; Zip Code			\$1,000.00
	4916 Main St Ste 230 Houston, TX 77002			
required.)	ment (See instructions regarding type of information	9 • Complete if direct exp Candidate / Officeholder		fit Candidate/Officeholder **
Public Promotion	n:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Humble ISD Education Foundation			Amount (\$)
08/21/2007	Payee address; City; State; Zip Code			\$150.00
	20200 Eastway Village Drive Humble, TX 77338			
required.)	/ment (See instructions regarding type of information	Candidate / Officeholder		fit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(In	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name IHOP			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 5790 FM 1960 Rd W Houston, TX 77069			\$11.29
Dumana of no		II Canandata if dinast ann		fit Condidate/Officebalder II
required.) Office:Staff Meal	ment (See instructions regarding type of information	Candidate / Officeholder		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	IHOP			(\$)
07/18/2007	Payee address; City; State; Zip Code			\$13.22
	5790 FM 1960 Rd W Houston, TX 77069			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct exp		fit Candidate/Officeholder ••
Office:Staff Meal	s	Januluale / Uniceriolder	name.	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(1)	Catoliae of Toxac, complete concade 1)	Cilioo fiola.		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/9	97 Report: 64/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name IHOP	_		7 Amount (\$)
08/13/2007	6 Payee address; City; State; Zip Code 5790 FM 1960 Rd W Houston, TX 77069			\$10.31
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name IHOP			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 5790 FM 1960 Rd W Houston, TX 77069			\$12.00
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name IHOP			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 5790 FM 1960 Rd W Houston, TX 77069			\$13.63
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name IHOP			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 5790 FM 1960 Rd W Houston, TX 77069			\$13.87
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/9	97 Report: 65/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Incarnate Word Academy			7 Amount (\$)
08/21/2007	6 Payee address; City; State; Zip Code 609 Crawford Houston, TX 77002			\$200.00
8 Purpose of pay required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehole		efit Candidate/Officeholder
Public Promotion	n:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Internal Revenue Service			Amount (\$)
07/26/2007	Payee address; City; State; Zip Code PO Box 105083 Atlanta, GA 30348			\$1,045.05
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Employee Comp Payroll Taxes	ensation:Payroll Taxes 2nd Q 2007 941			
-	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Internal Revenue Service			Amount (\$)
10/17/2007	Payee address; City; State; Zip Code PO Box 105083 Atlanta, GA 30348			\$2,703.54
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Employee Comp Payroll Taxes	ensation:Payroll Taxes 3rd Q 2007 941	O#:		
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Irma's			Amount (\$)
07/10/2007	Payee address; City; State; Zip Code 22 North Chenevert St Houston, TX 77002			\$50.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
<u></u>				

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 41/9	97 Report: 66/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Irma's			7 Amount (\$)
07/31/2007	6 Payee address; City; State; Zip Code			\$50.00
	22 North Chenevert St Houston, TX 77002			
required.)	ment (See instructions regarding type of information	9 ** Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder ••
Office:Staff Mea	S			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Irma's			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code 22 North Chenevert St			\$50.50
	Houston, TX 77002			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
Bate	Irma's			(\$)
09/25/2007	Payee address; City; State; Zip Code 22 North Chenevert St			\$188.00
	Houston, TX 77002			
required.)	/ment (See instructions regarding type of information	** Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder ••
Office:Staff Mea	5	Office garrent		
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Irma's			Amount (\$)
11/01/2007	Payee address; City; State; Zip Code			\$4,255.89
	22 North Chenevert St Houston, TX 77002			
	ment (See instructions regarding type of information			fit Candidate/Officeholder
required.) Political Promotion	on:Meals Leukemia Underwriters Reception	Candidate / Officeholde	er name:	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
,	, <u> </u>			

1-800-325-8506

POLITICAL EXPENDITURES

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 42/	97 Report: 67/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name J Christopher's Pizza & Pasta			7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code 2245 Northpark Dr Humble, TX 77339			\$33.66
8 Purpose of payrequired.) Office:Staff Meal	yment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehold		efit Candidate/Officeholder
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name James Coney Island			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 3607 S Shepherd Dr Houston, TX 77098			\$10.27
Purpose of pay required.) Office:Staff Mea	yment (See instructions regarding type of information	Candidate / Officehold		efit Candidate/Officeholder ••
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name James Coney Island			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 3607 S Shepherd Dr Houston, TX 77098			\$9.18
Purpose of pay required.) Office:Staff Mea	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene der name:	efit Candidate/Officeholder
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name James Coney Island			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 3607 S Shepherd Dr Houston, TX 77098			\$13.53
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/9	97 Report: 68/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name James Coney Island			7 Amount (\$)
11/05/2007	6 Payee address; City; State; Zip Code 3607 S Shepherd Dr Houston, TX 77098			\$10.12
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(In	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name James Coney Island			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 3607 S Shepherd Dr Houston, TX 77098			\$12.23
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Jason's Deli			Amount (\$)
07/11/2007	Payee address; City; State; Zip Code 901 McKinney Houston, TX 77002			\$17.28
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Jason's Deli			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 901 McKinney Houston, TX 77002			\$12.29
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 44/9	97 Report: 69/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Jimmy G's	<u>'</u>		7 Amount (\$)
07/20/2007	6 Payee address; City; State; Zip Code 307 North Sam Houston Parkway Houston, TX 77060			\$215.15
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Jimmy G's			Amount (\$)
07/30/2007	Payee address; City; State; Zip Code 307 North Sam Houston Parkway Houston, TX 77060			\$60.77
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Jimmy G's			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code 307 North Sam Houston Parkway Houston, TX 77060			\$35.77
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Jimmy G's			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 307 North Sam Houston Parkway Houston, TX 77060			\$29.79
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		Flortonic Filing Version 2.2.4

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 45/	97 Report: 70/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Jimmy G's			7 Amount (\$)
09/05/2007	6 Payee address; City; State; Zip Code 307 North Sam Houston Parkway Houston, TX 77060			\$46.81
	Houston, TA 77000			
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name JL & Company Productions			Amount (\$)
11/26/2007	Payee address; City; State; Zip Code PO Box 3311 Conroe, TX 77305			\$1,275.00
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct	t expenditure to bene der name:	efit Candidate/Officeholder
• ′	eciation Entertainment for Precinct 4			
•	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name JL & Company Productions			Amount (\$)
12/18/2007	Payee address; City; State; Zip Code PO Box 3311			\$123.75
	Conroe, TX 77305			
required.)	/ment (See instructions regarding type of information	Complete if direction Candidate / Officehol		fit Candidate/Officeholder ••
Office:Staff Appr Christmas Party	eciation Entertainment for Precinct 4 (Tip)	Office sought:		
(l	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Keep Houston Beautiful			Amount (\$)
11/07/2007	Payee address; City; State; Zip Code 3000 Richmond Ave Ste 350 Houston, TX 77098			\$1,500.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 46/	97 Report: 71/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Klein Band Association			7 Amount (\$)
07/25/2007	6 Payee address; City; State; Zip Code 4008 Louetta Rd Box 262 Spring, TX 77388			\$175.00
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Print Advertising	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Klein Education Foundation			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code 7200 Spring Cypress Rd Klein, TX 77379			\$250.00
required.)	/ment (See instructions regarding type of information	Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder ••
Public Promotion:Sponsorship				
(If travel outside of Texas, complete Schedule T) Office Office				
Date	Payee name Kolache Factory			Amount (\$)
10/25/2007	Payee address; City; State; Zip Code 14095 Northwest Fwy Houston, TX 77040			\$23.54
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		I efit Candidate/Officeholder **
Political Promotion	on:Meals Superintendant's Breakfast Event	Office sought:		
(It	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Kolache Factory			Amount (\$)
10/25/2007	Payee address; City; State; Zip Code 14095 Northwest Fwy Houston, TX 77040			\$23.54
required.)	ment (See instructions regarding type of information on:Meals Mayor's Breakfast Event	Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/9	97 Report: 72/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Kolache Factory	•		7 Amount (\$)
12/17/2007	6 Payee address; City; State; Zip Code 14095 Northwest Fwy Houston, TX 77040			\$34.24
8 Purpose of pay required.) Political Promotion	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Kroger			Amount (\$)
10/24/2007	Payee address; City; State; Zip Code 1352 West 43rd St Houston, TX 77018			\$72.47
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder ••
Political Promotion:Meals Superintendant's Breakfast Event (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Kroger			Amount (\$)
10/25/2007	Payee address; City; State; Zip Code 1352 West 43rd St Houston, TX 77018			\$96.72
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		efit Candidate/Officeholder
	on:Meals Mayor's Breakfast Event f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
Duto	Kroger			(\$)
11/30/2007	Payee address; City; State; Zip Code 1352 West 43rd St Houston, TX 77018			\$66.13
Purpose of pay required.) Travel:Staff Gas	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 48/9	97 Report: 73/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Kroger	L		7 Amount (\$)
12/17/2007	6 Payee address; City; State; Zip Code			\$36.28
	1352 West 43rd St Houston, TX 77018			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
Political Promotion	on:Meals			
(In	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Lake Houston Family YMCA			Amount (\$)
08/09/2007	Payee address; City; State; Zip Code			\$150.00
	2420 West Lake Houston Parkway Kingwood, TX 77339			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Landry's			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code			\$100.00
	1212 Lake Robbins Dr The Woodlands, TX 77380			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Office:Staff Appr Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas	0.00		
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Le Peep			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code			\$11.62
	4702 Westheimer Rd Houston, TX 77027			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Office:Staff Meal	s			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
•	,			Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.	II.	AGE # chedule: 49/9	7 Report: 74/127
2 FILER NAME	Eversole, Gerald		CCOUNT # (1080801	Ethics Commission filers)
4 Date	5 Payee name Le Peep			7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code			\$12.33
	4702 Westheimer Rd Houston, TX 77027			
required.)	ment (See instructions regarding type of information	9 · · Complete if direct exper Candidate / Officeholder na	nditure to benef me:	it Candidate/Officeholder ••
Office:Staff Mea	S			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Leff, Frances			Amount (\$)
09/07/2007	Payee address; City; State; Zip Code			\$5,000.00
	55 Waugh Dr Ste 1111 Houston, TX 77007			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct exper Candidate / Officeholder na		it Candidate/Officeholder ••
Fundraising:Fee	s Fundraising Consulting Fee			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Lone Star Productions			Amount (\$)
07/11/2007	Payee address; City; State; Zip Code			\$960.00
	PO Box 311 Flatonia, TX 78941			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct exper		it Candidate/Officeholder ••
• ′	plies Support Services & Event Planning for	Canadate / Cinocholaci na	me.	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Lone Star Productions			(\$)
08/01/2007	Payee address; City; State; Zip Code			\$15,000.00
	PO Box 311 Flatonia, TX 78941			
	ment (See instructions regarding type of information	Complete if direct exper		it Candidate/Officeholder
	plies Video & Display Equipment for Eversole	Candidate / Officenoider na	me.	
Breakfast (I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3 3 4

The Instruction	ON GUIDE explains how to complete this form.	1 PAG Sch	E # edule: 50/97 Report: 75/127
2 FILER NAME	Eversole, Gerald		OUNT # (Ethics Commission filers) 80801
4 Date	5 Payee name Lone Star Productions		7 Amount (\$)
08/01/2007	6 Payee address; City; State; Zip Code		\$320.00
	PO Box 311 Flatonia, TX 78941		
8 Purpose of pay required.)	ment (See instructions regarding type of information	9 · · Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::
Print Advertising	:Design		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Lone Star Productions		Amount (\$)
08/23/2007	Payee address; City; State; Zip Code		\$9,897.00
	PO Box 311 Flatonia, TX 78941		
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct expendit	ure to benefit Candidate/Officeholder ::
Fundraising:Sup Production	plies Video & DVD of Eversole Breakfast		
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Lone Star Productions		Amount (\$)
09/05/2007	Payee address; City; State; Zip Code		\$10,000.00
	PO Box 311 Flatonia, TX 78941		
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct expendit	ure to benefit Candidate/Officeholder ••
. ,	plies Video & Display Equipment for Eversole	Canada (Compensate Traine	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name		Amount
	Lone Star Productions		(\$)
12/26/2007	Payee address; City; State; Zip Code		\$96.47
	PO Box 311 Flatonia, TX 78941		
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct expendit	ure to benefit Candidate/Officeholder
•	plies DVD-R Copies of 2006 & 2007 Eversole	Canadato / Omorroldor Harrie	•
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
			Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 51/	97 Report: 76/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Lowe's			7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code 22600 Eastex Freeway Kingwood, TX 77339			\$54.09
required.)	ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Public Promotion	n:Flowers & Gifts:Constituent Gift Card	Office sought:		
(li	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Lowe's			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 22600 Eastex Freeway Kingwood, TX 77339			\$13.14
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Fundraising:Sup Supplies	plies Eversole Breakfast Table Signage			
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Lowe's			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code 22600 Eastex Freeway Kingwood, TX 77339			\$100.00
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Office:Staff Appr Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas	Office country		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code 1414 Waugh Dr Houston, TX 77019			\$19.68
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 52/9	97 Report: 77/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Luby's Cafe	1		7 Amount (\$)
08/13/2007	6 Payee address; City; State; Zip Code 1414 Waugh Dr Houston, TX 77019			\$23.58
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 1414 Waugh Dr Houston, TX 77019			\$12.32
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 1414 Waugh Dr Houston, TX 77019			\$10.87
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 1414 Waugh Dr Houston, TX 77019			\$16.72
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		Electronic Filing Version 2.2.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 53/9	97 Report: 78/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Luby's Cafe	'		7 Amount (\$)
08/23/2007	6 Payee address; City; State; Zip Code			\$34.38
	1414 Waugh Dr Houston, TX 77019			
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Staff Meal	S	0"		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
09/07/2007	Payee address; City; State; Zip Code			\$27.66
	1414 Waugh Dr Houston, TX 77019			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Office:Staff Meal	s			
(ii	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Luby's Cafe			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 1414 Waugh Dr			\$11.83
	Houston, TX 77019			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Staff Meal	5	Office sought:		
(II	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Macy's			Amount (\$)
07/24/2007	Payee address; City; State; Zip Code			\$207.79
	4000 Willowbrook Mall Houston, TX 77070			
	ment (See instructions regarding type of information	Complete if direct		l efit Candidate/Officeholder
	n:Flowers & Gifts:Staff Gift for Frances Leff	Candidate / Officenoid	ici IIdilie.	
(Fundraising Org	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3.3.4

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 54/	97 Report: 79/127
2 FILER NAME	Eversole, Gerald	3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Madeyalook Productions		7 Amount (\$)
09/28/2007	6 Payee address; City; State; Zip Code 4771 Sweetwater Blvd Ste 152 Sugar Land, TX 77479		\$985.08
8 Purpose of pay required.)	yment (See instructions regarding type of information	9 · · Complete if direct expenditure to bendandidate / Officeholder name:	efit Candidate/Officeholder **
Electronic Media	:Production 25th Anniversary of Jones Park	0.00	
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Madeyalook Productions		Amount (\$)
11/01/2007	Payee address; City; State; Zip Code 4771 Sweetwater Blvd Ste 152 Sugar Land, TX 77479		\$595.38
Purpose of pay	yment (See instructions regarding type of information	Complete if direct expenditure to bene Candidate / Officeholder name:	efit Candidate/Officeholder
	:Production Leukemia Underwriters Reception		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Main Jewel LLC		Amount (\$)
07/02/2007	Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018		\$250.00
Purpose of pay	ment (See instructions regarding type of information	Complete if direct expenditure to bene Candidate / Officeholder name:	efit Candidate/Officeholder
Campaign:Rent	& Utilities	Office sought:	
(I	f travel outside of Texas, complete Schedule T)	Office held:	
Date	Payee name Main Jewel LLC		Amount (\$)
08/10/2007	Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018		\$250.00
Purpose of par required.) Campaign:Rent	wment (See instructions regarding type of information	** Complete if direct expenditure to bendandidate / Officeholder name:	efit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 55/	97 Report: 80/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Main Jewel LLC			7 Amount (\$)
09/07/2007	6 Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018			\$250.00
8 Purpose of pay required.) Campaign:Rent	wment (See instructions regarding type of information Utilities	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(H	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Main Jewel LLC			Amount (\$)
10/12/2007	Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018			\$250.00
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		ffit Candidate/Officeholder **
Campaign:Rent	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Main Jewel LLC			Amount (\$)
11/07/2007	Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018			\$250.00
Purpose of pay required.) Campaign:Rent	wment (See instructions regarding type of information & Utilities	** Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Main Jewel LLC			Amount (\$)
12/06/2007	Payee address; City; State; Zip Code 4001 N Shepherd Suite 221 Houston, TX 77018			\$250.00
Purpose of pay required.) Campaign:Rent	ment (See instructions regarding type of information & Utilities	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 56/9	97 Report: 81/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Mangum-Howell Community Center			7 Amount (\$)
09/07/2007	6 Payee address; City; State; Zip Code 2500 Frick Rd Houston, TX 77038			\$2,500.00
required.)	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder **
Public Promotion	n:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Max Bowl North			Amount (\$)
09/05/2007	Payee address; City; State; Zip Code 2390 Wilson Rd Humble, TX 77396			\$1,160.00
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Staff Appr	reciation Road & Bridge Crew Bowling League			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name May Community Center			Amount (\$)
09/07/2007	Payee address; City; State; Zip Code 2500 Frick Rd Houston, TX 77038			\$2,500.00
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder ••
Public Promotion	n:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name McAllisters Deli			Amount (\$)
09/29/2007	Payee address; City; State; Zip Code 6500 FM 1960 East Humble, TX 77346			\$933.50
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	n:Sponsorship 25th Anniversary of Jones Park	Office sought:		
(li	f travel outside of Texas, complete Schedule T)	Office held:		Floctronic Filing Varsion 3.3.4

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 57/	97 Report: 82/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Micheal's			7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code			\$327.24
	19653 Highway 59 N Humble, TX 77338			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
Senior Adult Pro	nt Appreciation Donation of Art Supplies For gram Pct 4 f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	· · · · · · · · · · · · · · · · · · ·			
Date	Payee name Mid Town Cafe			Amount (\$)
07/13/2007	Payee address; City; State; Zip Code			\$12.18
	55 Waugh Dr Houston, TX 77007			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct	t expenditure to bene der name:	efit Candidate/Officeholder
Office:Staff Mea	s			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Mid Town Cafe			Amount (\$)
07/16/2007	Payee address; City; State; Zip Code			\$16.50
	55 Waugh Dr Houston, TX 77007			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder
Office:Staff Mea	s	Office cought		
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Mid Town Cafe			Amount (\$)
07/17/2007	Payee address; City; State; Zip Code			\$16.51
	55 Waugh Dr Houston, TX 77007			
Purpose of pay	/ment (See instructions regarding type of information	Complete if direct		I fit Candidate/Officeholder ••
Office:Staff Mea	s			
(1	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

SCHEDULE F

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 58/9	97 Report: 83/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Mid Town Cafe			7 Amount (\$)
07/18/2007	6 Payee address; City; State; Zip Code 55 Waugh Dr Houston, TX 77007			\$18.86
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Mike Stafford Campaign			Amount (\$)
11/13/2007	Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046			\$1,000.00
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Political Promotio	on:Sponsorship f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Miller's Downtown			Amount (\$)
07/13/2007	Payee address; City; State; Zip Code 109 W Main St Charlottesville, VA 22902			\$32.26
required.)	/ment (See instructions regarding type of information	Complete if direction Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder ••
(See travel info o	on Schedule T) f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
07/07/2007				\$25.25
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direction Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 59/	97 Report: 84/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Minute Maid Park			7 Amount (\$)
08/07/2007	6 Payee address; City; State; Zip Code			\$25.25
	PO Box 288 Houston, TX 77001			
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code PO Box 288			\$10.00
	Houston, TX 77001			
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder ••
Office:Parking (S	Staff Meal)			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
08/26/2007	Payee address; City; State; Zip Code PO Box 288			\$14.01
	Houston, TX 77001			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder **
		Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
08/26/2007	Payee address; City; State; Zip Code PO Box 288			\$76.50
	Houston, TX 77001			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Hat	n:Flowers & Gifts:Constituent Astros Jersey &	Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 60/	97 Report: 85/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Minute Maid Park	•		7 Amount (\$)
08/26/2007	6 Payee address; City; State; Zip Code PO Box 288 Houston, TX 77001			\$55.00
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code PO Box 288 Houston, TX 77001			\$45.00
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Minute Maid Park			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code PO Box 288 Houston, TX 77001			\$7.25
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Molina's Mexican Restaurant			Amount (\$)
08/15/2007	Payee address; City; State; Zip Code 7901 Westheimer Houston, TX 77063			\$46.60
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.	1 PAGE Sche	: # dule: 61/97 Report: 86/127
2 FILER NAME	Eversole, Gerald	3 ACCC 0108	DUNT # (Ethics Commission filers)
4 Date	5 Payee name Molina's Mexican Restaurant	•	7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code 7901 Westheimer Houston, TX 77063		\$5.00
required.)	yment (See instructions regarding type of information	9 · · Complete if direct expenditu Candidate / Officeholder name:	re to benefit Candidate/Officeholder
Office:Parking (S	Staff Meal)	Office sought:	
(li	f travel outside of Texas, complete Schedule T)	Office held:	
Date	Payee name Molina's Mexican Restaurant		Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 7901 Westheimer Houston, TX 77063		\$5.00
Purpose of pay required.)	yment (See instructions regarding type of information	** Complete if direct expenditu Candidate / Officeholder name:	re to benefit Candidate/Officeholder
Office:Parking (S	Staff Meal)		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Molina's Mexican Restaurant		Amount (\$)
09/10/2007	Payee address; City; State; Zip Code 7901 Westheimer Houston, TX 77063		\$21.09
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct expenditu Candidate / Officeholder name:	re to benefit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Molina's Mexican Restaurant		Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 7901 Westheimer Houston, TX 77063		\$5.00
Purpose of pay required.) Office:Parking (S	yment (See instructions regarding type of information Staff Meal)	Candidate / Officeholder name:	re to benefit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	

The Instruction	ON GUIDE explains how to complete this form.		PAGE # Schedule: 62/9	97 Report: 87/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name NHMCCD Foundation			7 Amount (\$)
09/12/2007	6 Payee address; City; State; Zip Code			\$200.00
	5000 Research Forest Dr The Woodlands, TX 77381			
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct e Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder **
Political Promoti	on:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Ninfa's Express			Amount (\$)
10/23/2007	Payee address; City; State; Zip Code			\$179.11
	600 Travis Ste 7A Houston, TX 77002			
required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Office:Staff Appreciation Lunch Meeting for Downtown Staff				
(If travel outside of Texas, complete Schedule T) Office sought: Office held:				
Date	Payee name Northwest Forest Republican Women PAC			Amount (\$)
10/24/2007	Payee address; City; State; Zip Code			\$1,000.00
	5502 Mt Royal Circle Houston, TX 77069			
required.)	/ment (See instructions regarding type of information	** Complete if direct of Candidate / Officehold		fit Candidate/Officeholder ••
Political Promoti	on:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Northwest Forest Republican Women PAC			Amount (\$)
11/07/2007	Payee address; City; State; Zip Code			\$1,000.00
	5502 Mt Royal Circle Houston, TX 77069			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		fit Candidate/Officeholder ••
Political Promoti	on:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	-			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 63/9	97 Report: 88/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Office Depot	1		7 Amount (\$)
07/09/2007	6 Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$10.81
required.)	yment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder **
Office:Office Sup	pplies			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
08/01/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$21.41
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Office Sup	pplies			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$13.32
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene er name:	fit Candidate/Officeholder
Office:Office Sup	opiles	0.00		
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$8.88
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Office Sup	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
		Jilloo Hold.		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 64/9	97 Report: 89/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Office Depot	·		7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$28.75
8 Purpose of pay required.) Office:Office Sup	ment (See instructions regarding type of information oplies	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$72.37
required.)	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder **
Office:Office Supplies (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$13.04
Purpose of pay required.) Office:Office Sup	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
10/17/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$33.98
Purpose of pay required.) Office:Office Sup	ment (See instructions regarding type of information oplies	** Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 65/9	97 Report: 90/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Office Depot	'		7 Amount (\$)
11/09/2007	6 Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$63.85
required.)	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder ••
Office:Office Sup	pplies			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
12/15/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$168.96
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Office:Office Supplies				
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Office Depot			Amount (\$)
12/18/2007	Payee address; City; State; Zip Code 20075 I 45 N Spring, TX 77388			\$11.89
required.)	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene ler name:	efit Candidate/Officeholder
Office:Office Sup	pplies			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Paper Chase			Amount (\$)
11/26/2007	Payee address; City; State; Zip Code 12710 North Freeway Houston, TX 77060			\$27.42
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
Administrative:C	ourier & Delivery f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(1	care at a sample of the control of the contro	Silico ficia.		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 66/	97 Report: 91/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Pappadeaux Seafood Kitchen	•		7 Amount (\$)
07/01/2007	6 Payee address; City; State; Zip Code			\$54.36
	Heaumont, TX 77707			
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Pappasito's Cantina			Amount (\$)
08/08/2007	Payee address; City; State; Zip Code 10005 FM 1960 @ Hwy 59 N			\$14.29
	Humble, TX 77338			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder ••
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Pappasito's Cantina			Amount (\$)
08/08/2007	Payee address; City; State; Zip Code 10005 FM 1960 @ Hwy 59 N			\$32.95
	Humble, TX 77338			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Candidate / Officehol		efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	Pappasito's Cantina			(\$)
09/06/2007	Payee address; City; State; Zip Code 10005 FM 1960 @ Hwy 59 N Humble, TX 77338			\$34.58
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
,				

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 67/	97 Report: 92/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Party City	-		7 Amount (\$)
12/18/2007	6 Payee address; City; State; Zip Code			\$40.54
	6476 FM 1960 West Houston, TX 77069			
required.)	ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehole		efit Candidate/Officeholder
Party	eciation Supplies for Precinct 4 Christmas f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	· · · · · · · · · · · · · · · · · · ·			I Americat
Date	Payee name People PC Internet Services			Amount (\$)
07/31/2007	Payee address; City; State; Zip Code			\$10.95
	1375 Peachtree St Level A Atlanta, GA 30309			
Purpose of pay	ment (See instructions regarding type of information	" Complete if direct	expenditure to bene	efit Candidate/Officeholder
required.)		Candidate / Officehole	der name:	on Canadato, Chiconologo
Internet Communications:Internet Service		Office country		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name People PC Internet Services			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code			\$10.95
	1375 Peachtree St Level A Atlanta, GA 30309			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Internet Commu	nications:Internet Service			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name People PC Internet Services			Amount (\$)
08/31/2007	Payee address; City; State; Zip Code			\$10.95
	1375 Peachtree St Level A Atlanta, GA 30309			
Purpose of pay required.)	/ment (See instructions regarding type of information	Candidate / Officehole		I efit Candidate/Officeholder
Internet Commu	nications:Internet Service			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 68/9	97 Report: 93/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Peso's Mexican Restaurant			7 Amount (\$)
08/14/2007	6 Payee address; City; State; Zip Code 6512 FM 2100 Crosby, TX 77532			\$18.59
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Peso's Mexican Restaurant			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 6512 FM 2100 Crosby, TX 77532			\$10.16
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Pronto Cucinino			Amount (\$)
07/05/2007	Payee address; City; State; Zip Code 3191 W Holcombe Blvd Houston, TX 77025			\$35.13
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(H	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Pronto Cucinino			Amount (\$)
07/06/2007	Payee address; City; State; Zip Code 3191 W Holcombe Blvd Houston, TX 77025			\$27.01
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 69/	97 Report: 94/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Pronto Cucinino			7 Amount (\$)
08/09/2007	6 Payee address; City; State; Zip Code 3191 W Holcombe Blvd Houston, TX 77025			\$14.56
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Pronto Cucinino			Amount (\$)
09/18/2007	Payee address; City; State; Zip Code 3191 W Holcombe Blvd Houston, TX 77025			\$28.58
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Quorum Report			Amount (\$)
07/23/2007	Payee address; City; State; Zip Code PO Box 8 Austin, TX 78767			\$297.69
required.)	/ment (See instructions regarding type of information ues & Subscriptions	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Ridgways			Amount (\$)
10/16/2007	Payee address; City; State; Zip Code 6300 Clayton Houston, TX 77001			\$154.57
Purpose of pay required.) Photography	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 70/9	97 Report: 95/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name RJ's Rib Joint			7 Amount (\$)
08/25/2007	6 Payee address; City; State; Zip Code 2515 Riverside Houston, TX 77004			\$54.79
8 Purpose of parrequired.) Office:Staff Mea	yment (See instructions regarding type of information	9 · · Complete if direc Candidate / Officehol		fit Candidate/Officeholder **
(1	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Ruggles Cafe & Bakery			Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 903 Westheimer Houston, TX 77006			\$46.16
Purpose of parequired.) Office:Staff Mea	yment (See instructions regarding type of information	** Complete if direc Candidate / Officehol		fit Candidate/Officeholder ••
Office sought: Office held:				
Date	Payee name Rusty Hardin & Associates PC			Amount (\$)
12/06/2007	Payee address; City; State; Zip Code 1401 McKinney Ste 2250 Houston, TX 77010			\$12,414.85
Purpose of par required.) Professional Ser	yment (See instructions regarding type of information	** Complete if direc Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Rusty Hardin & Associates PC			Amount (\$)
12/11/2007	Payee address; City; State; Zip Code 1401 McKinney Ste 2250 Houston, TX 77010			\$2,231.21
Purpose of par required.) Professional Ser	yment (See instructions regarding type of information	Candidate / Officehol		fit Candidate/Officeholder **
(1	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 71/9	97 Report: 96/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Sacred Heart School			7 Amount (\$)
10/15/2007	6 Payee address; City; State; Zip Code			\$100.00
	907 Runneburg Crosby, TX 77532			
8 Purpose of pay required.)	ment (See instructions regarding type of information	9 * Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Public Promotion	n:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Salt Branch Outpost			Amount (\$)
09/22/2007	Payee address; City; State; Zip Code			\$416.76
	244 West Main Street Fredericksburg, TX 78624			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Office:Office Sup	pplies			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Saltgrass Steak House			Amount (\$)
10/25/2007	Payee address; City; State; Zip Code 1803 Shepherd Drive			\$56.93
	Houston, TX 77007			
required.)	/ment (See instructions regarding type of information	Complete if direct e	expenditure to bene er name:	fit Candidate/Officeholder **
Office:Staff Meal	s	Office sought:		
(li	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name			Amount
	Sam Houston State University			(\$)
09/05/2007	Payee address; City; State; Zip Code			\$1,500.00
	PO Box 2026 Huntsville, TX 77341			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder ••
Political Promotic	on:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 72/	97 Report: 97/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Sam Miller's Warehouse			7 Amount (\$)
07/15/2007	6 Payee address; City; State; Zip Code			\$49.51
	1210 E Cary St Richmond, VA 23219			
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
(See travel info o	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Sam's Club			Amount (\$)
09/17/2007	Payee address; City; State; Zip Code			\$92.18
	12205 West Rd Houston, TX 77065			
required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder **
Office:Office Sup	pplies			
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Sam's Club			Amount (\$)
09/26/2007	Payee address; City; State; Zip Code 12205 West Rd			\$48.90
	Houston, TX 77065			
Purpose of pay required.) Political Promotic	ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		efit Candidate/Officeholder **
Political Promoti	on inviedis	Office sought:		
(II	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Sam's Club			Amount (\$)
10/18/2007	Payee address; City; State; Zip Code			\$291.83
	12205 West Rd Houston, TX 77065			
required.)	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Political Promotion	on:ivieais	Office course to		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 73/9	97 Report: 98/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Sam's Club			7 Amount (\$)
11/08/2007	6 Payee address; City; State; Zip Code			\$37.24
	12205 West Rd Houston, TX 77065			
required.)	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Political Promoti	on:Meals			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Sam's Country BBQ			Amount (\$)
07/25/2007	Payee address; City; State; Zip Code			\$557.08
	12202 Veterans Memorial Houston, TX 77067			
	/ment (See instructions regarding type of information			fit Candidate/Officeholder **
required.) Office:Staff Appreciation Lyons Camp Perfect Attendance		Candidate / Officehold	der name:	
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Sam's Country BBQ			Amount (\$)
	Cam's Country BBQ			
10/15/2007	Payee address; City; State; Zip Code			\$557.08
	12202 Veterans Memorial Houston, TX 77067			
Purpose of pay	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Office:Staff Appr	eciation Lyons Camp Perfect Attendance			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Sam's Country BBQ			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code			\$9.08
	12202 Veterans Memorial Houston, TX 77067			
	/ment (See instructions regarding type of information			fit Candidate/Officeholder
required.) Office:Staff Mea	s	Candidate / Officehold	der name:	
(1	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 74/9	97 Report: 99/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Senior Adults' Fun Events			7 Amount (\$)
11/05/2007	6 Payee address; City; State; Zip Code 1731 Hugh Rd Houston, TX 77067			\$1,000.00
required.)	yment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
Public Promotion	n:Sponsorship f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Shade			Amount (\$)
08/12/2007	Payee address; City; State; Zip Code 250 W 19th St Houston, TX 77008			\$31.25
required.)	yment (See instructions regarding type of information	Complete if direct Candidate / Officehol	expenditure to bene der name:	fit Candidate/Officeholder **
Office:Staff Meals (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Shade			Amount (\$)
09/10/2007	Payee address; City; State; Zip Code 250 W 19th St Houston, TX 77008			\$30.44
Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	expenditure to bene der name:	efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Shell			Amount (\$)
07/15/2007	Payee address; City; State; Zip Code 6930 Gessner Houston, TX 77040			\$48.01
Purpose of pay required.) Travel:Staff Gas	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 75/9	97 Report: 100/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Shell	·		7 Amount (\$)
12/17/2007	6 Payee address; City; State; Zip Code 6930 Gessner Houston, TX 77040			\$14.00
Purpose of pay required.) Political Promotic	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Skilligalee Restaurant			Amount (\$)
07/12/2007	Payee address; City; State; Zip Code 5416 Glenside Dr Richmond, VA 23228			\$88.76
required.)	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder **
(See travel info on Schedule T) (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Special Olympics Texas			Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 16503 Ramsey Rd Crosby, TX 77532			\$250.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Sports Authority			Amount (\$)
07/21/2007	Payee address; City; State; Zip Code 8625 FM 1960 Rd W Houston, TX 77070			\$158.05
required.)	ment (See instructions regarding type of information eciation Road & Bridge Work Crew Perfect	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Attendance	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 76/9	97 Report: 101/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Sports Authority	·		7 Amount (\$)
08/25/2007	6 Payee address; City; State; Zip Code 8625 FM 1960 Rd W Houston, TX 77070			\$368.40
required.)	/ment (See instructions regarding type of information	9 · · Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
Attendance	eciation Road & Bridge Work Crew Perfect f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Spring Branch Education Foundation			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code 955 Campbell Rd Houston, TX 77024			\$500.00
required.)	ment (See instructions regarding type of information	Complete if direct e. Candidate / Officeholde		fit Candidate/Officeholder **
Public Promotion:Sponsorship				
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Spring ISD Education Foundation			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code 16717 Ella Blvd Houston, TX 77090			\$100.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	** Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name St Paul Missionary Baptist Church			Amount (\$)
07/19/2007	Payee address; City; State; Zip Code 3113 Clay St Houston, TX 77003			\$1,000.00
Purpose of pay required.) Public Promotion	ment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	·	·	· · · · · · · · · · · · · · · · · · ·	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 77/	97 Report: 102/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Starbucks			7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code 4830 Wilson Rd Ste 100 Humble, TX 77339			\$53.79
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
Eversole Breakfa	ns:Logoed Items Sample Ceramic Mugs for ast fravel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Strack Farms BBQ			Amount (\$)
08/28/2007	Payee address; City; State; Zip Code 5707 Louetta Rd Spring, TX 77379			\$52.00
Purpose of pay required.) Office:Staff Mea	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name Strack Farms BBQ			Amount (\$)
08/28/2007	Payee address; City; State; Zip Code 5707 Louetta Rd Spring, TX 77379			\$45.63
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Street Olympics			Amount (\$)
09/12/2007	Payee address; City; State; Zip Code PO Box 300185 Houston, TX 77230			\$350.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1 PAG Scho	E # edule: 78/97 Report: 103/127
2 FILER NAME	Eversole, Gerald		OUNT # (Ethics Commission filers) 80801
4 Date	5 Payee name Tan's Hunan Restaurant	•	7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code 1426 Kingwood Dr		\$34.00
	Kingwood, TX 77339		
8 Purpose of pay required.)Office:Staff Meal	ment (See instructions regarding type of information	9 ** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Tan's Hunan Restaurant		Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 1426 Kingwood Dr Kingwood, TX 77339		\$17.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
Date	Payee name Target		Amount (\$)
12/07/2007	Payee address; City; State; Zip Code 20777 Highway 59 N Humble, TX 77338		\$100.00
required.)	ment (See instructions regarding type of information	** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::
Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
(II	traver outside of Texas, complete ochedule 1)	Office field.	
Date	Payee name Tealas Mexican Restaraunt		Amount (\$)
07/14/2007	Payee address; City; State; Zip Code 3210 W Dallas St Houston, TX 77019		\$76.90
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:	
			Electronic Filing Version 3 3 4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 79/9	97 Report: 104/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Texans For Tommy Williams			7 Amount (\$)
11/07/2007	6 Payee address; City; State; Zip Code			\$1,000.00
	1 E Greenway Plaza Ste 225 Houston, TX 77046			
8 Purpose of pay required.)	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder **
Political Promotic	on:Sponsorship			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Texas Cafeteria			Amount (\$)
07/16/2007	Payee address; City; State; Zip Code 2400 N Shepherd Dr Houston, TX 77008			\$10.20
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Texas Executive Women Scholarship Fund			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code PO Box 2035 Bellaire, TX 77402			\$1,250.00
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder
Public Promotion	n:Sponsorship	0":		
(li	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Texas Tea Party Republican Women			Amount (\$)
07/10/2007	Payee address; City; State; Zip Code 4517 Moreton Ct			\$125.00
	Spring, TX 77379			
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Political Promotio	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
,	, , , 🗀			Floatronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 80/9	97 Report: 105/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Thai Spice Asian Cuisine			7 Amount (\$)
07/30/2007	6 Payee address; City; State; Zip Code 460 W 19th St Houston, TX 77008			\$27.38
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The 100 Club			Amount (\$)
08/21/2007	Payee address; City; State; Zip Code 1233 West South Loop Ste 1250 Houston, TX 77027			\$100.00
required.)	ment (See instructions regarding type of information	Complete if direct	expenditure to bene der name:	fit Candidate/Officeholder ••
Public Promotion:Sponsorship				
(If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name The Catfish Place			Amount (\$)
07/26/2007	Payee address; City; State; Zip Code 3400 State Highway 19 Huntsville, TX 77340			\$35.23
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		efit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The Cheesecake Factory			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 5015 Westheimer Road Houston, TX 77056			\$55.57
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 81/	97 Report: 106/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name The Clubs Of Kingwood	·		7 Amount (\$)
12/11/2007	6 Payee address; City; State; Zip Code 1700 Lake Kingwood Trail Kingwood, TX 77339			\$25.00
required.)	/ment (See instructions regarding type of information eciation Birthday Gift for Precinct 4 Employee	9 · · Complete if direct of Candidate / Officehold		fit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The Former Texas Rangers Foundation			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code PO Box 290229 Kerrville, TX 78029			\$250.00
required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		efit Candidate/Officeholder **
Public Promotion:Sponsorship (If travel outside of Texas, complete Schedule T)		Office sought: Office held:		
Date	Payee name The Former Texas Rangers Foundation			Amount (\$)
09/24/2007	Payee address; City; State; Zip Code PO Box 290229 Kerrville, TX 78029			\$15,000.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	** Complete if direct of Candidate / Officehold		fit Candidate/Officeholder
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The Hobby Center For The Performing Arts			Amount (\$)
08/11/2007	Payee address; City; State; Zip Code 800 Bagby Street Ste 300 Houston, TX 77002			\$1,405.00
Purpose of pay required.) Public Promotion	/ment (See instructions regarding type of information	** Complete if direct of Candidate / Officehold		efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 82/	97 Report: 107/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name The Home Depot			7 Amount (\$)
12/07/2007	6 Payee address; City; State; Zip Code			\$100.00
	19103 IH 45 Conroe, TX 77385			
required.)	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
Office:Staff Appr Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas	Office sought:		
(II	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name The Mercer Society			Amount (\$)
07/24/2007	Payee address; City; State; Zip Code			\$1,544.24
	22306 Aldine Westfield Humble, TX 77338			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Fundraising:Sup Breakfast	plies Decoration Supplies for the Eversole	Office country		
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	Payee name			Amount
Date	The National Association Of Counties			(\$)
Date 07/18/2007	The National Association Of Counties Payee address; City; State; Zip Code			
	The National Association Of Counties			(\$)
07/18/2007	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW	•• Complete if direct Candidate / Officehold		(\$)
07/18/2007 Purpose of pay	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 /ment (See instructions regarding type of information	Candidate / Officehold		(\$) \$12.60
O7/18/2007 Purpose of pay required.) (See travel info of	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 /ment (See instructions regarding type of information			(\$) \$12.60
O7/18/2007 Purpose of pay required.) (See travel info of	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001	Candidate / Officehold Office sought:		(\$) \$12.60 efit Candidate/Officeholder
Purpose of pay required.) (See travel info of the Date	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 ment (See instructions regarding type of information on Schedule T) f travel outside of Texas, complete Schedule T)	Candidate / Officehold Office sought:		stit Candidate/Officeholder Amount (\$)
O7/18/2007 Purpose of pay required.) (See travel info of the content of the con	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001 The National Association Of Counties Payee address; City; State; Zip Code 15 Massachusetts Avenue NW Washington, DC 20001	Candidate / Officehold Office sought:		(\$) \$12.60 efit Candidate/Officeholder
Purpose of pay required.) (See travel info of the Date	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The Northeast Hospital Foundation Payee address; City; State; Zip Code Constructions regarding type of information The Northeast Hospital Foundation Payee address; City; State; Zip Code	Candidate / Officehold Office sought:		stit Candidate/Officeholder Amount (\$)
Purpose of payrequired.) (See travel info of the Date)	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The Northeast Hospital Foundation Payee address; City; State; Zip Code 18951 Memorial North	Candidate / Officehold Office sought: Office held:	expenditure to bene	stit Candidate/Officeholder Amount (\$)
Purpose of payrequired.) (See travel info of the distribution of t	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The Northeast Hospital Foundation Payee name The Northeast Hospital Foundation Payee address; City; State; Zip Code 18951 Memorial North Humble, TX 77338 The Northeast Hospital Type of information	Office sought: Office held:	expenditure to bene	sfit Candidate/Officeholder ** Amount (\$) \$2,500.00
Purpose of pay required.) (See travel info of the pay required.) Date 10/15/2007 Purpose of pay required.) Public Promotion	The National Association Of Counties Payee address; City; State; Zip Code 25 Massachusetts Avenue NW Washington, DC 20001 The Northeast Hospital Foundation Payee name The Northeast Hospital Foundation Payee address; City; State; Zip Code 18951 Memorial North Humble, TX 77338 The Northeast Hospital Type of information	Office sought: Office held:	expenditure to bene	sfit Candidate/Officeholder ** Amount (\$) \$2,500.00

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 83/9	97 Report: 108/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name The Peach Tree	•		7 Amount (\$)
09/22/2007	6 Payee address; City; State; Zip Code			\$45.97
	210 South Adams			
	Fredericksburg, TX 78624			
8 Purpose of pay	yment (See instructions regarding type of information	9 * Complete if direct Candidate / Officehold	expenditure to bene	fit Candidate/Officeholder **
Office:Staff Mea	ls	Canadato / Cinconola	or name.	
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The Regional Arts Council			Amount (\$)
08/01/2007	Payee address; City; State; Zip Code			\$700.00
	PO Box 1321			
	Tomball, TX 77377			
Purpose of pay	yment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder
Public Promotion	n:Sponsorship			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name The UPS Store			Amount (\$)
10/17/2007	Payee address; City; State; Zip Code			\$23.24
	906 W McDermott Dr Ste 116			
	Allen, TX 75013			
Purpose of pay	yment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder **
Administrative:C	ourier & Delivery			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Ticketmaster			Amount (\$)
00/40/007	 			
08/16/2007	Payee address; City; State; Zip Code			\$599.05
08/16/2007	Payee address; City; State; Zip Code 520 Texas Ave Houston, TX 77002			\$599.05
	520 Texas Ave	· · Complete if direct	expenditure to bene	\$599.05
Purpose of par	520 Texas Ave Houston, TX 77002 yment (See instructions regarding type of information	• Complete if direct Candidate / Officehold		
Purpose of par	520 Texas Ave Houston, TX 77002 yment (See instructions regarding type of information n:Sponsorship David Bray Photography for			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 84/9	97 Report: 109/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Tin Roof BBQ			7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code			\$786.84
	18918 Town Center Blvd			
	Atascocita, TX 77346			
8 Purpose of pay	yment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder ••
Office:Staff Appr	reciation Annual Staff Luncheon Meeting			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Tin Roof BBQ			Amount (\$)
09/19/2007	Payee address; City; State; Zip Code			\$23.24
	18918 Town Center Blvd Atascocita, TX 77346			
Purpose of pay required.)	yment (See instructions regarding type of information	Candidate / Officehold		fit Candidate/Officeholder ••
Office:Staff Mea	ls	0.00		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Tomball All-Sports Booster Club			Amount (\$)
07/25/2007	Payee address; City; State; Zip Code			\$100.00
	PO Box 1193 Tomball, TX 77377			
required.)	yment (See instructions regarding type of information	Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder ••
Print Advertising	:Placement	Office sought:		
(I	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Tomball Baseball Alumni			Amount (\$)
	Tunibali basebali Alumili			
10/31/2007	Payee address; City; State; Zip Code			\$150.00
	26422 Pin Oak Drive Magnolia, TX 77354			
Purpose of par	yment (See instructions regarding type of information	• Complete if direct	expenditure to bene	fit Candidate/Officeholder ••
	0 0 11	Candidate / Officehold		
required.) Public Promotion	n:Sponsorship	Garialadic / Ginocriolo	iei riame.	
Public Promotion	n:Sponsorship f travel outside of Texas, complete Schedule T)	Office sought: Office held:	ei name.	

PO Box 2007 Tomball, TX 77377 8 Purpose of payment (See instructions regarding type of information required.) Public Promotion:Sponsorship (If travel outside of Texas, complete Schedule T) Date Payee name Top Hat Catering City, State, Zip Code 9 ** Complete if direct expenditure to benefit Candidate/Officehor Candidate / Officeholder name: Office sought: Office held: Amount (\$)	000.00
4 Date Tomball Centennial Commission 11/19/2007 6 Payee address; City; State; Zip Code PO Box 2007 Tomball, TX 77377 8 Purpose of payment (See instructions regarding type of information required.) Public Promotion: Sponsorship (If travel outside of Texas, complete Schedule T) Office sought: Office held: Date Payee name Top Hat Catering 12/15/2007 Payee address; City; State; Zip Code Sponsorship Payee address; City; State; Zip Code Sponsorship 12/15/2007 Payee address; City; State; Zip Code Sponsorship Sponsorship Sponsorship City State; Zip Code Sponsorship City State	000.00
Tomball Centennial Commission 6 Payee address; City; State; Zip Code PO Box 2007 Tomball, TX 77377 8 Purpose of payment (See instructions regarding type of information required.) Public Promotion: Sponsorship (If travel outside of Texas, complete Schedule T) Date Payee name Top Hat Catering Payee address; City; State; Zip Code Tomball, TX 77377 9 ** Complete if direct expenditure to benefit Candidate/Officehocandidate / Office holder name: Office sought: Office held: Amount (\$) 12/15/2007 Payee address; City; State; Zip Code 1702 Wilson Rd \$9,3	
6 Payee address; City; State; Zip Code PO Box 2007 Tomball, TX 77377 8 Purpose of payment (See instructions regarding type of information required.) Public Promotion: Sponsorship (If travel outside of Texas, complete Schedule T) Date Payee name Top Hat Catering Payee address; City; State; Zip Code 1702 Wilson Rd \$1,6	
required.) Public Promotion:Sponsorship (If travel outside of Texas, complete Schedule T) Office sought: Office held: Date Payee name Top Hat Catering Payee address; City; State; Zip Code 1702 Wilson Rd Candidate / Officeholder name: Office sought: Office held: Amount (\$) \$9,5	lder ••
(If travel outside of Texas, complete Schedule T) ☐ Office sought: Office held: Date Payee name Top Hat Catering 12/15/2007 Payee address; City; State; Zip Code 1702 Wilson Rd Office sought: Office held: Amount (\$) \$9,5	
Top Hat Catering 12/15/2007 Payee address; City; State; Zip Code 1702 Wilson Rd (\$) \$9,9	
1702 Wilson Rd	
	911.83
Purpose of payment (See instructions regarding type of information required.) Complete if direct expenditure to benefit Candidate/Officehor Candidate / Officeholder name:	lder ••
Office:Staff Appreciation Catering for Precinct 4 Employee Christmas Party Office sought:	
(If travel outside of Texas, complete Schedule T) Office held:	
Date Payee name Amount Torma Communications (\$)	
rayee address, City, State, Zip Code	342.11
5326 Graystone Lane Houston, TX 77069	
Purpose of payment (See instructions regarding type of information required.) Complete if direct expenditure to benefit Candidate/Officeho Candidate / Officeholder name:	lder ••
Fundraising:Invitations Invitations for Eversole Breakfast Office sought:	
(If travel outside of Texas, complete Schedule T) Office held:	
Date Payee name Amount Trigg's Catering Company (\$)	
08/21/2007 Payee address; City; State; Zip Code 307 Dennis St Humble, TX 77338	963.12
Purpose of payment (See instructions regarding type of information required.) Complete if direct expenditure to benefit Candidate/Officeholder name: Candidate / Officeholder name:	
Office Stall Appreciation Fish Fry for Road & Bridge Crew Office sought: Office held:	lder ••

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 86/	97 Report: 111/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Trigg's Catering Company			7 Amount (\$)
09/28/2007	6 Payee address; City; State; Zip Code			\$836.63
	307 Dennis St Humble, TX 77338			
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehole		efit Candidate/Officeholder
	eciation Fajita Dinner for Road & Bridge Crew f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Trigg's Catering Company			Amount (\$)
11/15/2007	Payee address; City; State; Zip Code			\$1,029.25
	307 Dennis St Humble, TX 77338			
required.)	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehole	expenditure to bene der name:	efit Candidate/Officeholder ••
Office:Staff Appr	eciation Fish Fry for Road & Bridge Crew			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Uncle Bob's Self-Storage			Amount (\$)
07/02/2007	Payee address; City; State; Zip Code 5250 FM 1960 Rd E			\$115.00
	Humble, TX 77346			
Purpose of pay required.) Campaign:Rent	ment (See instructions regarding type of information	Candidate / Officehole		efit Candidate/Officeholder ••
		Office sought:		
(It	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Uncle Bob's Self-Storage			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code 5250 FM 1960 Rd E			\$115.00
	Humble, TX 77346			
Purpose of pay required.) Campaign:Rent	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		efit Candidate/Officeholder **
	_	Office sought:		
(li	f travel outside of Texas, complete Schedule T)	Office held:		

1-800-325-8506

POLITICAL EXPENDITURES

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 87/	97 Report: 112/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Uncle Bob's Self-Storage	1		7 Amount (\$)
09/07/2007	6 Payee address; City; State; Zip Code 5250 FM 1960 Rd E Humble, TX 77346			\$115.00
8 Purpose of pay required.)	ment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehold		fit Candidate/Officeholder
Campaign:Rent	& Utilities			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Uncle Bob's Self-Storage			Amount (\$)
11/14/2007	Payee address; City; State; Zip Code 5250 FM 1960 Rd E Humble, TX 77346			\$115.00
Purpose of pay required.)	yment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder ••
Campaign:Rent	& Utilities			
(i	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Uncle Bob's Self-Storage			Amount (\$)
11/15/2007	Payee address; City; State; Zip Code 5250 FM 1960 Rd E Humble, TX 77346			\$115.00
required.)	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene ler name:	fit Candidate/Officeholder **
Campaign:Rent	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Uncle Bob's Self-Storage			Amount (\$)
12/06/2007	Payee address; City; State; Zip Code 5250 FM 1960 Rd E Humble, TX 77346			\$115.00
Purpose of pay required.) Campaign:Rent	yment (See instructions regarding type of information & Utilities	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.	1	PAGE # Schedule: 88/9	97 Report: 113/127
2 FILER NAME	Eversole, Gerald	3	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Uncle Bob's Self-Storage	•		7 Amount (\$)
12/19/2007	6 Payee address; City; State; Zip Code 5250 FM 1960 Rd E Humble, TX 77346			\$115.00
8 Purpose of pay required.)	/ment (See instructions regarding type of information	9 · · Complete if direct e Candidate / Officeholde	expenditure to bene er name:	fit Candidate/Officeholder **
Campaign:Rent	& Utilities			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name UPS Store			Amount (\$)
10/31/2007	Payee address; City; State; Zip Code 906 W McDermott Dr Ste 116 Allen, TX 75013			\$67.26
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
Administrative:C	ourier & Delivery			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name US Postmaster			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 601 Jefferson Houston, TX 77002			\$96.00
required.)	/ment (See instructions regarding type of information	Complete if direct e		fit Candidate/Officeholder **
Administrative:P	U Box Rental	Office sought:		
(li	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name US Postmaster			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code 601 Jefferson Houston, TX 77002			\$4.90
required.)	/ment (See instructions regarding type of information	Complete if direct e Candidate / Officeholde		fit Candidate/Officeholder **
Administrative:C	ourier & Delivery f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(II	i traver outside of Texas, complete schedule 1)	Office field.		Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.		PAGE # Schedule: 89/9	97 Report: 114/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name US Postmaster	•		7 Amount (\$)
08/27/2007	6 Payee address; City; State; Zip Code			\$2.66
	601 Jefferson			
	Houston, TX 77002			
8 Purpose of pay	/ment (See instructions regarding type of information	9 · · Complete if direct	expenditure to bene	fit Candidate/Officeholder
Administrative:C	ourier & Delivery	Candidate / Officeriold	ei name.	
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name US Postmaster			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code			\$9.40
	601 Jefferson Houston, TX 77002			
Purpose of pay	/ment (See instructions regarding type of information	" Complete if direct	expenditure to bene	fit Candidate/Officeholder
required.) Administrative:C		Candidate / Officehold		
Administrative.C		Office sought:		
(l	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name US Postmaster			Amount (\$)
09/10/2007	Payee address; City; State; Zip Code			\$36.90
	601 Jefferson Houston, TX 77002			
	1.000.0.1, 17.11002			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene er name:	efit Candidate/Officeholder ••
Administrative:C	ourier & Delivery	0.00		
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name			Amount
	US Postmaster			(\$)
11/01/2007	Payee address; City; State; Zip Code			\$2.56
	601 Jefferson Houston, TX 77002			
Purpose of pay required.)	ment (See instructions regarding type of information	Candidate / Officehold		fit Candidate/Officeholder
Administrative:C	ourier & Delivery			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
•	. , —			Electronic Filing Version 3 3 4

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 90/	97 Report: 115/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name US Postmaster			7 Amount (\$)
11/26/2007	6 Payee address; City; State; Zip Code			\$45.10
	601 Jefferson Houston, TX 77002			
8 Purpose of pay required.) Administrative:C	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Vernon's Kuntry Kitchen			Amount (\$)
08/30/2007	Payee address; City; State; Zip Code 5901 West Davis			\$27.50
	Conroe, TX 77304			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	Complete if direct	t expenditure to bene der name:	efit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Vic & Anthony's Steakhouse			Amount (\$)
08/07/2007	Payee address; City; State; Zip Code 1510 Texas St			\$285.01
	Houston, TX 77002			
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Data	Payao namo			Amount
Date	Payee name Vic & Anthony's Steakhouse			(\$)
08/22/2007	Payee address; City; State; Zip Code 1510 Texas St Houston, TX 77002			\$22.00
Purpose of pay required.) Office:Parking (S	/ment (See instructions regarding type of information	Complete if direct		fit Candidate/Officeholder **
Onice.r arking (S	nan wear)	Office courte		
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 91/9	97 Report: 116/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Vincent's			7 Amount (\$)
07/07/2007	6 Payee address; City; State; Zip Code 2701 W Dallas St Houston, TX 77019			\$202.55
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$13.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$12.85
Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold	expenditure to bene der name:	fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
07/18/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$13.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 92/	97 Report: 117/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Waffle House			7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
8 Purpose of pay required.) Office:Staff Mea	/ment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Mea	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehol	t expenditure to bene der name:	fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder **
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehol		fit Candidate/Officeholder ••
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 93/9	97 Report: 118/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Waffle House			7 Amount (\$)
08/22/2007	6 Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
8 Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	9 · Complete if direct Candidate / Officehold		fit Candidate/Officeholder
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
08/22/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
(It	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Waffle House			Amount (\$)
11/05/2007	Payee address; City; State; Zip Code 7106 Will Clayton Pkwy Humble, TX 77338			\$14.00
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder ••
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		

SCHEDULE F

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 94/9	97 Report: 119/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Waffle House			7 Amount (\$)
11/05/2007	6 Payee address; City; State; Zip Code			\$14.00
	7106 Will Clayton Pkwy Humble, TX 77338			
8 Purpose of pay required.) Office:Staff Meal	yment (See instructions regarding type of information	9 · · Complete if direct Candidate / Officehole		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Walmart			Amount (\$)
07/15/2007	Payee address; City; State; Zip Code			\$35.92
	21150 Kuykendahl Rd Spring, TX 77379			
Purpose of pay required.) Office:Office Sup	yment (See instructions regarding type of information	** Complete if direct Candidate / Officehole		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Data	B			A
Date	Payee name Walmart			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code 21150 Kuykendahl Rd Spring, TX 77379			\$100.00
required.)	wment (See instructions regarding type of information reciation Door Prize for Precinct 4 Christmas	Complete if direct Candidate / Officehold		efit Candidate/Officeholder **
Party (Gift Card)		Office sought:		
(l'	f travel outside of Texas, complete Schedule T)	Office held:		
Date	Payee name Wayne Smith Campaign			Amount (\$)
09/25/2007	Payee address; City; State; Zip Code			\$1,000.00
	PO Box 4020 Baytown, TX 77522			
required.)	yment (See instructions regarding type of information	Complete if direct		efit Candidate/Officeholder
Political Promotion	on:Sponsorship f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
	r nover outaine or reads. Complete Schedule I)	OHICE HEIG.		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 95/9	97 Report: 120/127
2 FILER NAME	Eversole, Gerald		3 ACCOUNT# 01080801	(Ethics Commission filers)
4 Date	5 Payee name Wells Fargo	·		7 Amount (\$)
07/17/2007	6 Payee address; City; State; Zip Code 5219 FM 1960 Rd W Houston, TX 77069			\$307.00
required.)	/ment (See instructions regarding type of information	9 ** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
Visa Check Card	nt Appreciation Graduation Gifts (2 Prepaid ls) f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
		Omeo neid.		
Date	Payee name Wells Fargo			Amount (\$)
12/07/2007	Payee address; City; State; Zip Code 5219 FM 1960 Rd W Houston, TX 77069			\$100.00
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		efit Candidate/Officeholder ••
Office:Staff Appr Party (Gift Card)	eciation Door Prize for Precinct 4 Christmas			
- ` `	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Wells Fargo			Amount (\$)
12/18/2007	Payee address; City; State; Zip Code 5219 FM 1960 Rd W Houston, TX 77069			\$3.50
required.)	/ment (See instructions regarding type of information	Complete if direct Candidate / Officehold		fit Candidate/Officeholder
Administrative:B	anк Unarges			
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Westin Galleria			Amount (\$)
07/19/2007	Payee address; City; State; Zip Code 5060 West Alabama Houston, TX 77056			\$164.22
required.)	ment (See instructions regarding type of information plies Lodging for Fundraiser (Frances Leff)	** Complete if direct Candidate / Officehold		fit Candidate/Officeholder **
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
(1)	traver outside of Texas, complete schedule 1)	Office field.		

The Instruction	ON GUIDE explains how to complete this form.		PAGE # Schedule: 96/	97 Report: 121/127
2 FILER NAME	Eversole, Gerald	;	3 ACCOUNT # 01080801	(Ethics Commission filers)
4 Date	5 Payee name Westin Galleria	1		7 Amount (\$)
07/27/2007	6 Payee address; City; State; Zip Code			\$5,582.71
	5060 West Alabama Houston, TX 77056			
required.)	ment (See instructions regarding type of information	9 · Complete if direct of Candidate / Officehold		efit Candidate/Officeholder **
Fundraising:Sup	plies Catering For Eversole Breakfast			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Westin Galleria			Amount (\$)
08/10/2007	Payee address; City; State; Zip Code			\$21,000.00
	5060 West Alabama Houston, TX 77056			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct e		efit Candidate/Officeholder
Fundraising:Sup	plies Deposit on Space for Eversole Breakfast			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Westin Galleria			Amount (\$)
08/27/2007	Payee address; City; State; Zip Code			\$37.81
	5060 West Alabama Houston, TX 77056			
Purpose of pay required.)	/ment (See instructions regarding type of information	Complete if direct of Candidate / Officehold		I fit Candidate/Officeholder **
Office:Parking F	arking For Eversole Breakfast			
(l	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
Date	Payee name Westin Galleria			Amount (\$)
	vvestiri Galleria			(Ψ)
10/16/2007	Payee address; City; State; Zip Code			\$500.00
	5060 West Alabama Houston, TX 77056			
	, , , , , , , , , , , , , , , , , , , ,			
Purpose of pay required.)	ment (See instructions regarding type of information	Complete if direct e		efit Candidate/Officeholder ••
• ′	plies Catering Deposit for Eversole Breakfast			
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:		
				Electronic Filing Version 3.3.4

The Instruction	ON GUIDE explains how to complete this form.	1 PAG Scho	E # edule: 97/97 Report: 122/127		
2 FILER NAME	Eversole, Gerald	l l	OUNT # (Ethics Commission filers) 80801		
4 Date	5 Payee name Windrose Golf Club	1	7 Amount (\$)		
08/22/2007	\$14.00				
8 Purpose of pay required.) Office:Staff Meal	ment (See instructions regarding type of information	9 · · Complete if direct expendit Candidate / Officeholder name	rure to benefit Candidate/Officeholder ••		
(II	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
Date	Payee name Windrose Golf Club		Amount (\$)		
08/22/2007	Payee address; City; State; Zip Code 6235 Pinelakes Blvd Spring, TX 77379		\$12.00		
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::		
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
Date	Payee name Windrose Golf Club		Amount (\$)		
09/12/2007	Payee address; City; State; Zip Code 6235 Pinelakes Blvd Spring, TX 77379		\$257.60		
required.)	/ment (See instructions regarding type of information	** Complete if direct expendit Candidate / Officeholder name	ure to benefit Candidate/Officeholder ::		
Employees Cart	eciation A Day of Golf for Precinct 4 Rental f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
_	-				
Date	Payee name Windrose Golf Club		Amount (\$)		
11/05/2007	Payee address; City; State; Zip Code 6235 Pinelakes Blvd Spring, TX 77379		\$13.00		
Purpose of pay required.) Office:Staff Meal	/ment (See instructions regarding type of information	Complete if direct expenditure to benefit Candidate/Officeholder Candidate / Officeholder name:			
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
			Electronic Filing Version 3.3.4		

(512)463-5800 IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE SCHEDULE T

FOR TRAVE	EL OUTSI	DE OF TEXAS					
The Instruction Guide explains how to complete this form. 1 PAGE # Schedule: 1/5 Report: 1/2							
2 FILER NAME Evers	sole, Gerald			3 ACCOUNT # 01080801	(Ethics Commission filers)		
4 Name of Contributor / Co Albemarle County Co		r Organization / Pledgor / Payo sitors Bureau	ee	,			
5 Contribution / Expenditu	ire reported on:						
Schedule	A Scheo	Schedule D	X Schedule F	☐ Schedule G			
Schedule	H Scheo	COH-T	☐ PAC-T	☐ SPAC-T			
6 Dates of travel	7 Name of person(s) traveling Eversole, Jerry						
07/12/2007	8 Departure city Houston TX	or name of departure location	ſ				
07/16/2007	Destination ci Washington	y or name of destination locati DC	on				
10 Means of transportation Airline	on	Purpose of travel (included 2007 Conference for the second	=		event)		
Name of Contributor / C Avis Rent a Car	orporation or Labo	r Organization / Pledgor / Paye	ee				
Contribution / Expenditu	ire reported on:						
☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D			Schedule D	X Schedule F	☐ Schedule G		
Schedule	H Scheo	ule N COH-UC	COH-T	☐ PAC-T	☐ SPAC-T		
Dates of travel Name of person(s) traveling Eversole, Jerry							
07/12/2007	Departure city or name of departure location Houston TX						
07/16/2007	Destination city or name of destination location Washington DC						
Means of transportation Airline	on	Purpose of travel (includ 2007 Conference for t	=		event)		
Name of Contributor / C Colonial Williamsburg	•	r Organization / Pledgor / Payo	ee				
Contribution / Expenditu	ire reported on:						
Schedule	A Scheo	ule B Schedule C	Schedule D	X Schedule F	Schedule G		
Schedule	H Scheo	ule N COH-UC	COH-T	PAC-T	☐ SPAC-T		
Dates of travel	Name of person(s) traveling Eversole, Jerry						
07/12/2007	Departure city or name of departure location Houston TX						
07/16/2007	Destination ci Washington	y or name of destination locati	on				
Means of transportation Airline Purpose of travel (including name of conference, seminar, or other event) 2007 Conference for the National Association of Counties							

(512)463-5800

FOR TRAVE				CAL EXPE	ND	ITURE		SCHEDULE I
The Instruction Guide explains how to complete this form.						PAGE # Schedule: 2/5	Repo	ort: 124/127
2 FILER NAME Evers	sole, Gerald				3	ACCOUNT # 01080801		nics Commission filers)
4 Name of Contributor / C Exxon Mobil	corporation or Labo	r Organiz	ation / Pledgor / Paye	ee	•			
5 Contribution / Expenditu	ire reported on:							
☐ Schedule	A Sched	lule B	Schedule C	Schedule D	X	Schedule F		Schedule G
Schedule	H Sched	lule N	□ сон-ис	СОН-Т		PAC-T		SPAC-T
6 Dates of travel	7 Name of pers Eversole, Je		eling					
07/12/2007	8 Departure city Houston TX		of departure location					
07/16/2007	9 Destination ci Washington	•	e of destination locati	on				
10 Means of transportation Airline	on			ing name of conference the National Associa			vent)	
Name of Contributor / C Exxon Mobil	corporation or Labo	r Organiz	ation / Pledgor / Paye	ee				
Contribution / Expenditu	ire reported on:			_				
			Schedule D	X	Schedule F		Schedule G	
Schedule	H Sched	iule N	□ сон-ис	□ СОН-Т		PAC-T		SPAC-T
Dates of travel Name of person(s) traveling Eversole, Jerry								
Departure city or name of departure location 07/12/2007 Houston TX								
Destination city or name of destination location 07/16/2007 Washington DC			on					
Means of transportation Airline				ing name of conference the National Associa			vent)	
Name of Contributor / C Exxon Mobil	corporation or Labo	r Organiz	ation / Pledgor / Paye	ee				
Contribution / Expenditu	re reported on:							
Schedule A Schedule B		☐ Schedule C	Schedule D	X	Schedule F		Schedule G	
Schedule	H Sched	lule N	Сон-пс	СОН-Т		PAC-T		SPAC-T
Dates of travel	Name of person(s) traveling Eversole, Jerry							
07/12/2007	Departure city or name of departure location Houston TX							
07/16/2007	Destination ci Washington	-	e of destination locati	on				
I				ing name of conference the National Associa			vent)	

		FION OR POLITION OF TEXAS		, ,	SCHEDULE T		
The Instruction Guid	E explains how to		1 PAGE #	5 Report: 125/127			
2 FILER NAME Ever	sole, Gerald	3 ACCOUNT # 01080801	(Ethics Commission filers)				
4 Name of Contributor / C Exxon Mobil	Corporation or Labo	or Organization / Pledgor / Pay	/ee				
5 Contribution / Expendite	ure reported on:						
☐ Schedule	A Scheo	dule B Schedule C	Schedule D		☐ Schedule G		
Schedule	H Sched	dule N COH-UC	СОН-Т	☐ PAC-T	☐ SPAC-T		
6 Dates of travel	7 Name of pers Eversole, Je	- · · ·					
07/12/2007	8 Departure city Houston TX	y or name of departure location	n				
07/16/2007	Destination of Washington	ity or name of destination loca	tion				
10 Means of transportation Airline	on	11 Purpose of travel (included) 2007 Conference for	•		event)		
Name of Contributor / C George Bush Interco		or Organization / Pledgor / Pay	/ee				
Contribution / Expendite	ure reported on:		<u></u>		_		
Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G							
Schedule H Schedule N COH-UC COH-T PAC-T SPAC-T							
Dates of travel Name of person(s) traveling Eversole, Jerry							
Departure city or name of departure location 07/12/2007 Houston TX							
Destination city or name of destination location 07/16/2007 Washington DC							
Means of transportation Airline Purpose of travel (including name of conference, seminar, or other event) 2007 Conference for the National Association of Counties							
Name of Contributor / C George Bush Interco		or Organization / Pledgor / Pay	/ee				
Contribution / Expendite	ure reported on:						
☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☒ Schedule					Schedule G		
Schedule H Schedule N COH-UC COH-T PAC-T SPAC-T							
Dates of travel	Name of person(s) traveling Eversole, Jerry						
07/12/2007	Departure city Houston TX	y or name of departure location	n				
07/16/2007	Destination of Washington	ity or name of destination loca DC	tion				
Means of transportation	Purpose of travel (including name of conference, seminar, or other event) 2007 Conference for the National Association of Counties						

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE

	SCHEDULE	T
--	-----------------	---

(512)463-5800

FOR TRAVE	EL OUTSI	DE OF	TEXAS					
The Instruction Guide explains how to complete this form.						PAGE # Schedule: 4/5	Reno	ort: 126/127
2 FILER NAME Evers	sole, Gerald				3	ACCOUNT # 01080801		nics Commission filers)
4 Name of Contributor / C Miller's Downtown	corporation or Labo	r Organizatio	on / Pledgor / Paye	ee				
5 Contribution / Expenditure reported on:								
Schedule A Schedule B Schedule C Schedule D					X	Schedule F		Schedule G
Schedule			COH-UC	□ СОН-Т		PAC-T		SPAC-T
6 Dates of travel	7 Name of person(s) traveling Eversole, Jerry							
07/12/2007	8 Departure city Houston TX	or name of	departure location					
07/16/2007	Destination ci Washington	-	destination location	on				
10 Means of transportation Airline	on		,	ing name of conference he National Associa			vent)	
Name of Contributor / C Sam Miller's Wareho		r Organizatio	on / Pledgor / Paye	ee				
Contribution / Expenditu	ire reported on:							
Schedule A Schedule B Schedule C Schedule D			X	Schedule F		Schedule G		
Schedule	H Sched	lule N] сон-ис	СОН-Т		PAC-T		SPAC-T
Dates of travel Name of person(s) traveling Eversole, Jerry								
Departure city or name of departure location 07/12/2007 Houston TX								
Destination city or name of destination location 07/16/2007 Washington DC								
Means of transportation Airline			ing name of conference he National Associa			vent)		
Name of Contributor / C Skilligalee Restauran	•	r Organizatio	on / Pledgor / Paye	ee				
Contribution / Expenditu	ire reported on:							
Schedule A Schedule B Schedule C Schedule D			X	Schedule F		Schedule G		
☐ Schedule	H Sched	lule N	COH-UC	□ СОН-Т		PAC-T		SPAC-T
Dates of travel	Name of person(s) traveling Eversole, Jerry							
07/12/2007	Departure city or name of departure location 07/12/2007 Houston TX							
07/16/2007	Destination ci Washington	•	destination location	on				
Means of transportation Airline Purpose of travel (including name of confere 2007 Conference for the National Associated Purpose of travel)							vent)	

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

IN-KIND CO FOR TRAVE	SCHEDULE T					
The Instruction Guide	Report: 127/127					
2 FILER NAME Evers	sole, Gerald			3 ACCOUNT # 01080801	(Ethics Commission filers)	
4 Name of Contributor / C The National Associa		or Organization / Pledgor / Pay	ee			
5 Contribution / Expenditu	ire reported on:					
Schedule	A Sched	lule B Schedule C	Schedule D	X Schedule F	☐ Schedule G	
Schedule	H Sched	lule N COH-UC	□ СОН-Т	PAC-T	☐ SPAC-T	
6 Dates of travel	7 Name of pers Eversole, Je					
07/12/2007	8 Departure city Houston TX	or name of departure location	1		4	
07/16/2007	9 Destination ci Washington	ty or name of destination locat DC	ion			
10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Airline 2007 Conference for the National Association of Counties						