



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

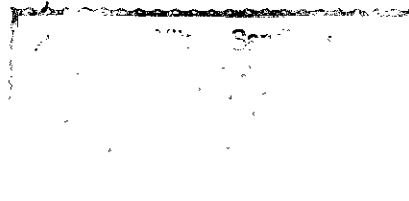
**FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b>	<b>16 ACCOUNT #</b> (Ethics Commission Filers)
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<b>17 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	** This box is for notice of political expenditures by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
		<b>COMMITTEE ADDRESS</b>
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>


<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2800.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3938.55
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 27,562.64
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**19 AFFIDAVIT**

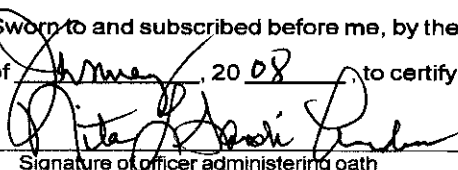


AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John Bradley, this the 8th day of January, 2008 to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath

Nita L. Sandi Andrews

 \_\_\_\_\_  
 Printed name of officer administering oath

Notary

 \_\_\_\_\_  
 Title of officer administering oath

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME <i>John Bradley</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>7-9-07</i>	5 Payee name <i>Minuteman Press</i> 6 Payee address; City; State; Zip Code <i>1611 Chisholm Trail, Austin, TX 78681</i>	7 Amount (\$) <i>1,338.55</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Envelopes and direct mail letter</i> (If travel outside of Texas, complete Schedule T)		9 <input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <i>10-2-07</i>	Payee name <i>Williamson County Republican Party</i> Payee address; City; State; Zip Code <i>Po Box 393, Round Rock, TX 78680</i>	Amount (\$) <i>\$ 1,250<sup>00</sup></i>
Purpose of payment (See instructions regarding type of information required.) <i>Reagan day dinner</i> (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <i>11-3-07</i>	Payee name <i>Bill Fairbrother</i> Payee address; City; State; Zip Code <i>2915 Pioneer Way, Round Rock, TX 78665</i>	Amount (\$) <i>100<sup>00</sup></i>
Purpose of payment (See instructions regarding type of information required.) <i>Campaign contribution</i> (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date <i>12-11-07</i>	Payee name <i>Williamson County Republican Party</i> Payee address; City; State; Zip Code <i>Po Box 393, Round Rock, TX 78680</i>	Amount (\$) <i>\$ 1,250</i>
Purpose of payment (See instructions regarding type of information required.) <i>Filing fee</i> (If travel outside of Texas, complete Schedule T)		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

*3922.55*

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>JOHN BRADLEY</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>7-9-07</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Henry Bell</b>	7 Amount of contribution (\$) <b>500<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>6000 N. Lamar Blvd., Suite 210, Austin, TX 78752</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <b>lawyer</b>		10 Employer (See Instructions)	
Date <b>7-9-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Stephen Orr</b>	Amount of contribution (\$) <b>500<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>804 Rio Grande St., Austin, TX 78701</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>7-26-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul and Lois Ranney</b>	Amount of contribution (\$) <b>200<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>3021 Gabriel View, Georgetown, TX 78628</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>7-26-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Clifford and Diane May</b>	Amount of contribution (\$) <b>100<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>Po Box 29742, Austin, TX 78755</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>8-7-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John and Linda Gustainis</b>	Amount of contribution (\$) <b>250<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>776 County Rd. 261, Georgetown, TX 78633</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>John Bradley</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>8-7-07</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Watson Howell</i>	7 Amount of contribution (\$) <i>100<sup>00</sup></i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1104 Nueces St., Suite 207, Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>8-11-07</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>SARA NAYLOR</i>	Amount of contribution (\$) <i>250<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>704 MLK, Georgetown, TX 78626</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)	
Date <i>8-19-07</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>LUCAS WILSON</i>	Amount of contribution (\$) <i>\$250<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>704 MLK, Georgetown, TX 78626</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)	
Date <i>9-8-07</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Harry Walsner</i>	Amount of contribution (\$) <i>100<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>123 Blanco Dr, Georgetown, TX 78628</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>9-11-07</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>George and Barbara Broughtwell</i>	Amount of contribution (\$) <i>50<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 977, Georgetown, TX 78627</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>JOHN BRADLEY</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>10-1-07</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>HARRY GIBBS</b>	7 Amount of contribution (\$) <b>100<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>209 S. Church St., Georgetown, TX 78626</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10-3-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>TOM KRAMPITZ</b>	Amount of contribution (\$) <b>100<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1210 Nueces St. 200, Austin, TX 78701</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <b>lawyer</b>		Employer (See Instructions)	
Date <b>10-15-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>HOWARD DUNNING</b>	Amount of contribution (\$) <b>200<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>103 Cattle Trail Way, Georgetown, TX 78628</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>11-3-07</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>PAT BERRYMAN</b>	Amount of contribution (\$) <b>100<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>206 Champions Dr., Georgetown, TX 78626</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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