

GOVERNOR FOR A DAY REPORT**FORM GOV-D
COVER SHEET**

See the back of this Cover Sheet for information about the law regarding the Governor for a Day Report.

OFFICE USE ONLY

Account #

Date Received

**HAND DELIVERED
RECEIVED****AUG 05 2003**

SE

Texas Ethics Commission

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

1 TOTAL PAGES OF SCHEDULE A FILED: 1
TOTAL PAGES OF SCHEDULE F FILED: 12 CHAIRMAN'S NAME TITLE FIRST MI
MR. GENE FONDREN
NICKNAME LAST SUFFIX3 CHAIRMAN'S MAILING ADDRESS STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
**P.O. Box 1028
Austin, Tx 78767-1028**4 CHAIRMAN'S TELEPHONE NUMBER AREA CODE TELEPHONE NUMBER EXTENSION
(512) 476-26865 REPORT TYPE FINAL REPORT SUPPLEMENTAL REPORT
IF THIS IS A FINAL REPORT, IS THERE AN OUTSTANDING DEBT ON THE DATE OF THIS REPORT?
 YES NO6 DATE OF CEREMONY MONTH DAY YEAR
04 / 26 / 20037 CONTRIBUTION TOTALS
A. TOTAL CONTRIBUTIONS FROM SCHEDULE A \$ **5,180.45**
B. TOTAL CONTRIBUTIONS OF \$50 OR LESS \$ **- 0 -**
C. TOTAL OF ALL CONTRIBUTIONS (ADD LINES 7A & 7B) \$ **5,180.45**
8 EXPENDITURE TOTALS
A. TOTAL EXPENDITURES FROM SCHEDULE F \$ **2,386.42**
B. TOTAL EXPENDITURES OF \$50 OR LESS \$ **- 0 -**
C. TOTAL OF ALL EXPENDITURES (ADD LINES 8A & 8B) \$ **2,386.42**

3



Signature of chairman

CONTRIBUTIONS

SCHEDULE A (GOV)

(Complete Schedule A for any individual or entity whose total contributions exceed \$50.)

1 Total pages this Schedule A (GOV):		OFFICE USE ONLY	
2 Chairman's name GENE FONDREN			
3 Date 4/26/03	4 Full name of contributor Tom Spillman Wholesale Beer Distributors of Texas 5 Contributor address; City; State; Zip Code AUSTIN, TX 78701-2429	6 Amount of contribution (\$) 3,912.15	7 Type of contribution <input type="checkbox"/> cash contribution <input checked="" type="checkbox"/> in-kind contribution
Date 4/26/03	Full name of contributor Butch Sparks Licensed Beverage Distributors Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of contribution (\$) 1,268.30	Type of contribution <input type="checkbox"/> cash contribution <input checked="" type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

EXPENDITURES

SCHEDULE F (GOV)

(Complete Schedule F for expenditures of more than \$50.)

1 Total pages this Schedule F (GOV):		OFFICE USE ONLY	
2 Chairman's name			
GENE FONDREN			
3 Date	4 Payee name	6 Amount (\$)	
7/9/03	Omega Graphics		
	5 Payee address; City; State; Zip Code		
	2221 Gregg Lane, Manor, Tx 78653	411.00	
7 Purpose of expenditure			
GFAO tape duplication			
Date	Payee name	Amount (\$)	
7/9/03	Huntsville Clearing Fund		
	Payee address; City; State; Zip Code		
	PO Box 4013 Huntsville, Tx 77342-4013	1488.30	
Purpose of expenditure			
GFAO Gifts (Briefcases)			
Date	Payee name	Amount (\$)	
8/4/03	Huntsville Clearing Fund		
	Payee address; City; State; Zip Code		
	PO Box 4013, Huntsville, Tx 77342-4013	487.12	
Purpose of expenditure			
Additional GFAO Gifts (Briefcases)			
Date	Payee name	Amount (\$)	
	Payee address; City; State; Zip Code		
Purpose of expenditure			

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED