

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH**  
**Cover Sheet pg 1**

The C/OH Instruction Guide explains how to complete this form.

1. ACCOUNT #  
(Ethics Commission filers)

2. Total Pages Filed:

15

3. CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

Ms

FIRST

Linda

MI

L

NICKNAME

LAST

Koop

SUFFIX

**OFFICE USE ONLY**

Date Received

4. CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
C Change of Address

Address/PO BOX; APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box: 794042  
Dallas TX 75379

Date Hand-delivered or Date Postmarked

5. CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

(972)

PHONE NUMBER

385 9991

EXTENSION

Receipt #

Amount

6. CAMPAIGN TREASURER NAME

MS / MRS / MR

Mr

FIRST

Arthur

MI

W

NICKNAME

LAST

Hollingsworth

SUFFIX

Date Processed

Date Imaged

7. CAMPAIGN TREASURER ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

1 Galeria Tower

APT / SUITE #;

2210

CITY;

Dallas TX 75240

STATE;

ZIP CODE

8. CAMPAIGN TREASURER PHONE

AREA CODE

(972)

PHONE NUMBER

702 7390

EXTENSION

9. REPORT TYPE

July 15

10. PERIOD COVERED

4/30/2009 THROUGH 6/30/2009

11. ELECTION

ELECTION DATE

ELECTION TYPE

NA

12. OFFICE

OFFICE HELD (if any)

Council District 11

13. OFFICE SOUGHT (if known)

Council District 11

14. NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  
C additional pages

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

NAME

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

15 C/OH NAME <b>Ms Linda L Koop</b>	16 ACCOUNT #(Ethics Commission filers)
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17 NOTICE FROM POLITICAL COMMITTEE(S)  C additional pages	** This box is for notice of political contributions accepted or political expenditures made 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.**	
	COMMITTEE TYPE	COMMITTEE NAME
	C GENERAL	COMMITTEE ADDRESS
	C SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14995.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 6962.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 59755.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

19 AFFIDAVIT

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.

\*\*\*ELECTRONICALLY CERTIFIED\*\*\*

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ms Linda L Koop, this the 1st day of July, 20 09, to certify which, witness my hand and seal of office.

---

Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form		1 Total pages Schedule A: 1 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myron Ball  6 Contributor address; City; State; Zip Code 4029 Cedarbrush Dr Dallas, TX 75229	7 Amount of Contribution (\$)  20.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip J Ritter  Contributor address; City; State; Zip Code 10824 Aladdin Dr Dallas, TX 75229	Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn Goldstein  Contributor address; City; State; Zip Code 7111 Lakehurst Dallas, TX 75230	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert A Farkas M.D.  Contributor address; City; State; Zip Code 7150 Eudora Dallas, TX 75230	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alan J Rubin  Contributor address; City; State; Zip Code 7455 Malabar Ln Dallas, TX 75230	Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**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 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Polikov	7 Amount of Contribution (\$)  100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2105 Western Avenue Fort Worth, TX 76107		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary M Cook	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10840 Strait Ln Dallas, TX 75229		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark E Hord	Amount of Contribution (\$)  200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14121 Meandering Way Dallas, TX 75254		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert C Petrasek Jr	Amount of Contribution (\$)  500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6308 Courtland Dr. Plano, TX 75093		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP	Amount of Contribution (\$)  1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760		(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: 3 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victoria Agnich  6 Contributor address; City; State; Zip Code 6816 Wander Place Dallas, TX 75230	7 Amount of Contribution (\$)  500.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. M. Sindermann  Contributor address; City; State; Zip Code 10032 Regal Park Ln Dallas, TX 75230-5536	Amount of Contribution (\$)  25.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn Smith  Contributor address; City; State; Zip Code 14 Downs Lake Circle Dallas, TX 75230	Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel T Allison  Contributor address; City; State; Zip Code 9210 Westwind Ct Dallas, TX 75231	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denny Holman  Contributor address; City; State; Zip Code 5614 Harbor Town Dallas, TX 75287	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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: 4 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbert S Rosenthal	7 Amount of Contribution (\$)  50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6262 Willowgate Dallas, TX 75230		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al Guerra	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5612 Planeta Ct NE Albuquerque, NM 87111		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herschel Forester	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8502 Edgemere Dallas, TX 75225		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Meyer	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7231 Valley View Pl. Dallas, TX 75240		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huelon A Harrison	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3310 Grayson Dr Dallas, TX 75224		(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: 5 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/12/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Lorch  6 Contributor address; City; State; Zip Code 11219 St.Judes Dallas, TX 75230	7 Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Pak  Contributor address; City; State; Zip Code 7107 Churchill Way Dallas, TX 75230	Amount of Contribution (\$)  200.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne A Huber  Contributor address; City; State; Zip Code 6242 Emeraldwood Pl Dallas, TX 75254-7826	Amount of Contribution (\$)  1000.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alice A Nye  Contributor address; City; State; Zip Code 12211 Creek Forest Dr. Dallas, TX 75230	Amount of Contribution (\$)  1000.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Texas PAC  Contributor address; City; State; Zip Code 13155 Noel Road Dallas, TX 75240	Amount of Contribution (\$)  2500.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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: 6 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <small>C out-of-state PAC (ID#: _____)</small> Darrell Jordan Dykema Gossett PLLC <hr/> 6 Contributor address; City; State; Zip Code 1717 Main Street Dallas, TX 75201	7 Amount of Contribution (\$)  300.00  <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <small>C out-of-state PAC (ID#: _____)</small> B Neill <hr/> Contributor address; City; State; Zip Code 3629 Greenbrier Drive Dallas, TX 75225	Amount of Contribution (\$)  500.00  <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <small>C out-of-state PAC (ID#: _____)</small> Edwina Lynn <hr/> Contributor address; City; State; Zip Code 7109 Briar Cove Dr Dallas, TX 75254-2705	Amount of Contribution (\$)  100.00  <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <small>C out-of-state PAC (ID#: _____)</small> HDR Inc <hr/> Contributor address; City; State; Zip Code 8404 Indian Hills Drive Omaha, NE 68114	Amount of Contribution (\$)  500.00  <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <small>C out-of-state PAC (ID#: _____)</small> Earl F Barnette <hr/> Contributor address; City; State; Zip Code 14057 Brookridge Dr Dallas, TX 75240	Amount of Contribution (\$)  100.00  <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
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: 7 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angel Munuz  6 Contributor address; City; State; Zip Code 6545 Linden Ln Dallas, TX 75230	7 Amount of Contribution (\$)  300.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collin Evans  Contributor address; City; State; Zip Code 6215 Royalton Dallas, TX 75230	Amount of Contribution (\$)  500.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Zilbermann  Contributor address; City; State; Zip Code 7718 Mason Dells Dallas, TX 75230	Amount of Contribution (\$)  250.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asher Dreyfus  Contributor address; City; State; Zip Code 12106 Vendom Place Dallas, TX 75230	Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Guida  Contributor address; City; State; Zip Code 6210 Prestondell Dr Dallas, TX 75254	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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: 8 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVE HARGROVE	7 Amount of Contribution (\$)  200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 566077 DALLAS, TX 75356		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David G Kaufman	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 505 Oppenheimer Los Alamos, NM 87544		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James H Reisman DDS	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 13210 Laurelwood Dallas, TX 75240		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Bastian	Amount of Contribution (\$)  500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12377 Merit Dr 10th floor Dallas, TX 75251		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard E Morgan	Amount of Contribution (\$)  25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7105 Dye Dr. Dallas, TX 75248		(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: 9 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JoAnn Messina  6 Contributor address; City; State; Zip Code 6234 La Cosa Dr. Dallas, TX 75248	7 Amount of Contribution (\$)  500.00  (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward Joyce  Contributor address; City; State; Zip Code 10028 Regal Park Ln Dallas, TX 75230-5534	Amount of Contribution (\$)  25.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gavin Ryan  Contributor address; City; State; Zip Code 5305 Kingsborough Dr. Plano, TX 75093	Amount of Contribution (\$)  50.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy Pollock  Contributor address; City; State; Zip Code 8600 Thackery St Dallas, TX 75225	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Funk  Contributor address; City; State; Zip Code 6623 Royal Crest Dallas, TX 75230	Amount of Contribution (\$)  100.00  (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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: 10 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter J Hino	7 Amount of Contribution (\$)  100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7255 Mimosa Ln. Dallas, TX 75230		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Taylor	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 118422 Carrollton, TX 75007		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cinde Weatherby	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1216 Belle Pl Fort Worth, TX 76107-3359		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy Lopez Lopez and Moorero Trust Wendy A Lopez Co-TTEE Connie Cay Moorero Co-TTEE	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4931 Stanford Ave Dallas, TX 75209		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comerica Inc. Political Action committee	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 75000 Detroit, MI 48275-2250		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**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: 11 of 11	
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT # (Ethics Commission filers)	
4 Date  05/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcos G Ronquillo	7 Amount of Contribution (\$)  250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1201 Elm St Dallas, TX 75270		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandy Greson	Amount of Contribution (\$)  100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7238 Heathermore Dallas, TX 75248-4202		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillip Bogner	Amount of Contribution (\$)  500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10 Rue Du Lac Dallas, TX 75230-2834		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Crawford	Amount of Contribution (\$)  250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4401 Livingston Ave Dallas, TX 75205-2609		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart Spechler	Amount of Contribution (\$)  50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 16004 Ranchita Dallas, TX 75248-3835		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

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

**POLITICAL EXPENDITURES****SCHEDULE F**

The Instruction Guide explains how to complete this form

1 Total pages Schedule F:  
1 of 1

2 FILER NAME

Ms Linda L Koop

3 ACCOUNT # (Ethics Commission filers)

4 Date

06/15/2009

5 Payee name

VERIZON WIRELESS

7 Amount  
(\$)

167.75

6 Payee address; City; State; Zip Code

ATLANTA, GA 30348

P.O. Box 105378

8 Purpose of payment (See instructions regarding type of information required.)

Wireless Service

(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

05/12/2009

Payee name

VERIZON WIRELESS

Amount  
(\$)

226.67

Payee address; City; State; Zip Code

ATLANTA, GA 30348

P.O. Box 105378

Purpose of payment (See instructions regarding type of information required.)

Wireless Services

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

05/02/2009

Payee name

Murphy Turner &amp; Associates

Amount  
(\$)

6394.72

Payee address; City; State; Zip Code

Austin, TX 78767-0296

P.O. Box 296

Purpose of payment (See instructions regarding type of information required.)

Consulting Services &amp; Mailing

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form		1 Total pages Schedule G:  1 of 1
2 FILER NAME  Ms Linda L Koop		3 ACCOUNT #(Ethics Commission filers)
4 Date  05/08/2009	5 Payee name LaMadeleine ..... 6 Payee address; City; State; Zip Code 11930 Preston Rd Dallas, TX 75230 7 Purpose of expenditure (See instructions regarding type of information required.) Lunch with Civic Leader (If travel outside of Texas, complete schedule T)	8 Amount (\$)  22.93  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  05/28/2009	Payee name WAMU ..... Payee address; City; State; Zip Code Dallas, TX 75266-0022 Purpose of expenditure (See instructions regarding type of information required.) Service Fees (If travel outside of Texas, complete schedule T)	Amount (\$)  12.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  05/12/2009	Payee name BJs Addison ..... Payee address; City; State; Zip Code Dallas, TX 75254 Purpose of expenditure (See instructions regarding type of information required.) Lunch with Civic Leader (If travel outside of Texas, complete schedule T)	Amount (\$)  25.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  05/09/2009	Payee name Delaware North Companies ..... Payee address; City; State; Zip Code Austin, TX 45999 Purpose of expenditure (See instructions regarding type of information required.) Lunch - Trip to Legislature (If travel outside of Texas, complete schedule T)	Amount (\$)  8.64  <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date  06/20/2009	Payee name Staples ..... Payee address; City; State; Zip Code Addison, TX 75001 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies (If travel outside of Texas, complete schedule T)	Amount (\$)  104.95  <input checked="" type="checkbox"/> Reimbursement from political contributions intended

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