

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 26 A 10:13

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) CLEO BOHLS FUND	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 4710 ECK LAVE	
CITY, STATE and ZIP CODE AUSTIN, TX 78734	
2. FEC IDENTIFICATION NUMBER C00248799	
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 04/01/2000 through 06/30/2000		
6. (a) Cash on Hand January 1, 19_____		\$ 36,636.15
(b) Cash on Hand at Beginning of Reporting Period	\$ 36,636.15	
(c) Total Receipts (from Line 10)	\$ 48,345.00	\$ 48,345.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 84,981.15	\$ 84,981.15
7. Total Disbursements (from Line 30)	\$ 41,542.01	\$ 41,542.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 43,439.14	\$ 43,439.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 F Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer TERESA J. SPEARS	Date 6/17/2000
Signature of Treasurer <i>Teresa J. Spears</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X
(revised 5/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE CLEO BOHLS FUND		REPORT COVERING PERIOD FROM 4/1/00 TO: 6/30/2000	
		COLUMN A Total This Period	COLUMN B Calendar Year
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		8265.97	8265.97
ii. Unitemized		32954.03	32954.03
iii. Total	(add i and ii) >	41220.00	41220.00
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		7125.00	7125.00
d. Total Contributions	(add a iii, b and c) >	48345.00	48345.00
12. Transfers From Affiliated/Other Party Committees		0	0
13. All Loans Received		0	0
14. Loan Repayments Received		0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0	0
17. Other Federal Receipts (Dividends, Interest, etc.)		0	0
18. Transfers from Nonfederal Account for Joint Activity		0	0
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	48345.00	48345.00
20. Total Federal Receipts	(subtract line 18 from line 19) >	48345.00	48345.00
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule I 44)			
i. Federal Share		0	0
ii. Non-Federal Share		0	0
b. Other Federal Operating Expenditures		24042.01	24042.01
c. Total Operating Expenditures	(add a i, a ii, and b) >	24042.01	24042.01
22. Transfers to Affiliated/Other Party Committees		0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees		1000.00	1000.00
24. Independent Expenditures (use Schedule E)		0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0	0
26. Loan Repayments Made		0	0
27. Loans Made		0	0
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		0	0
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contribution Refunds	(add a, b and c) >	0	0
29. Other Disbursements		16500.00	16500.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	41542.01	41542.01
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	41542.01	41542.01
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		48345.00	48345.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans) (subtract line 33 from 32)		48345.00	48345.00
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	24042.01	24042.01
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures	(subtract line 36 from 35) >	24042.01	24042.01

PACS OVER \$200.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 3
FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TAYLOR COUNTY REP. WOMEN 8133 DROVERS LANE ABILENE, TX 79602-5466	PAC	05/08/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HIDALGO COUNTY REP. WOMEN Pct. 2 Box 645 San Juan, TX 78589	PAC	05/18/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MESQUITE REP. WOMAN PAC 1426 EASTERN HTS. MESQUITE, TX 75149	PAC	05/20/00	\$ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAUGHTERS OF LIBERTY PAC 2207 Blue Willow HOUSTON, TX 77042	PAC	05/23/00	\$ 455.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 455.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NEW BRAUNFELS REP. WOMEN 2999 MORNING STAR NEW BRAUNFELS, TX 78132-4722	PAC	04/18/00	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PARK CITIES REP. WOMAN'S CLUB 4519 Westway Ave. DALLAS, TX 75205	PAC	05/10/00	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Friends of Jane Nelson P.O. Box 270389 Flower Mound, TX 75027-0389	Elected Official Campaign fund	05/12/00	\$ 470.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation State Texas Senator	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

2325.00

TOTAL This Period (last page this line number only)

PACS Over \$200 cont.

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 3

FOR LINE NUMBER 110

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NAME OF COMMITTEE (In Full)

CLEO BOTTLS FUND

A. Full Name, Mailing Address and ZIP Code Houston Professional Women 2314 Gentry Side Houston, TX 77077	Name of Employer PAC	Date (month, day, year) 05/21/00	Amount of Each Receipt this Period \$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code Bexar County RW PAC 606 Crestway San Antonio, TX 78239	Name of Employer PAC	Date (month, day, year) 05/12/00	Amount of Each Receipt this Period \$ 1080.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code TEXAS TEA PARTY PAC 7514 MORETON CT. SPRING, TX 77379	Name of Employer PAC	Date (month, day, year) 05/10/00	Amount of Each Receipt this Period \$ 655.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code FOUNDERS VISION RW PAC 16906 Isle of Man Rd. Pflugerville, TX 78660	Name of Employer PAC	Date (month, day, year) 05/06/00	Amount of Each Receipt this Period \$ 330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code PEGGY HAMRICK CAMPAIGN P.O. Box 692075285 HOUSTON, TX 77269	Name of Employer State of Texas	Date (month, day, year) 05/08/00	Amount of Each Receipt this Period \$ 700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: State Representative Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code LAKE COURSE AREA RW PAC 13301 WALDEN RD. MONTGOMERY, TX 77356	Name of Employer PAC	Date (month, day, year) 05/05/00	Amount of Each Receipt this Period \$ 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code BILLESPIE COUNTY RW PAC 1707 GrapeTown Rd. Fredericksburg, TX 78624-9133	Name of Employer PAC	Date (month, day, year) 04/21/00	Amount of Each Receipt this Period \$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: _____ Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

3445.00

TOTAL This Period (last page this line number only)

PACS OVER \$200.00 Cont.

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page
 PAGE 3 OF 3
 FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)
 CLEO BOWLES FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lake Conroe Area RW PAC 13101 Melville Dr. Montgomery, TX 77356	PAC	04/04/00	\$ 405.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Central Texas Republican Women 4541 West Dr. Belton, TX 76513	PAC	04/20/00	\$ 200.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MAGIC CIRCLE RW CLUB 6131 Piping Rock Lane HOUSTON, TX 77057	PAC	04/18/00	\$ 750.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 1355.00
 TOTAL This Period (last page this line number only) 7125.00

Individuals over \$200.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 3
FOR LINE NUMBER 11001

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NAME OF COMMITTEE (in Full)

CLEO BOWLS FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARY JANE AVERY 130 SUMMERWOOD BEAUMONT, TX 77706	N/A CANDIDATE FOR TX HOUSE	06/16/00	IN-KIND \$2000.00 120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CANDIDATE	04/04/00	Aggregate Year-to-Date > \$ 2020.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOROTHY WISEMAN P.O. Box 392 ARLINGTON, TX 76004-0392	N/A	05/24/00	\$ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 275.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHNNIE HOWELL 11735 N. Nottingham Cir. HOUSTON, TX 77071		05/30/00	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FARMING	Aggregate Year-to-Date > \$ 400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN PEYTON 1401 Elm St., S.E. 4750 DALLAS, TX 75202		05/16/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 350.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MRS. DEBRA ROSS 1111 HORSESHOE DR. SUGAR LAND, TX 77478-3462	N/A	05/16/00	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$ 200.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MRS. RAY BUTCHKO 4072 ENCLAVE MESA Cir. AUSTIN, TX 78731	N/A	05/17/00 06/03/00	\$ 385.00 35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Realtor	Aggregate Year-to-Date > \$ 420.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MRS. DONNA SUTTLE 5802 CAJUN WAY BAYTOWN, TX 77520	self-employed	05/17/00	\$ 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Home Designer	Aggregate Year-to-Date > \$ 280.00	

SUBTOTAL of Receipts This Page (optional)

4045.00

TOTAL This Period (last page this line number only)

Individuals over \$200, cont.

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 3
FOR LINE NUMBER 11203

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NAME OF COMMITTEE (in full)

CLEO BOWLS FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HON. JON LINDSAY P.O. Box 2783 HOUSTON, TX 77252	State of TX	05/10/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: State Senator	Aggregate Year-to-Date > \$ 350.00	
HON. DAVID DEWHURST 5 Post Oak Park, Ste. 1400 HOUSTON, TX 77027	State of TX	05/08/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LAND COMMISSIONER	Aggregate Year-to-Date > \$ 350.00	
MS. OLENA BONER 84 Northwood Pl. Mabank, TX 75147	N/A	05/05/00	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 350.00	
NANCY HARRISON 4405 Ridgerton Rd. Ft. Worth, TX 76116-8028		05/05/00	\$ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 240.00	
PAULINE CUSACK P.O. Box 25 WILLOW CITY, TX 78675	Self	06/19/00	IN-KIND \$ 1080.97
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Willow Creek Longhorns	Aggregate Year-to-Date > \$ 1080.97	
MR. GERARD EVENWEL 298 Greenhill Park Ave. Mt. Pleasant, TX 75455		04/24/00	\$ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIR. OF COMPENSATION + Benefits	Aggregate Year-to-Date > \$ 600.00	
MRS. KATHRYN BOYD 205 Shoal Dr. GEORGETOWN, TX 78628	N/A	04/19/00	\$ 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker	Aggregate Year-to-Date > \$ 225.00	

SUBTOTAL of Receipts This Page (optional)

3195.97

TOTAL This Period (last page this line number only)

Individuals over \$200.00 cont.

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 13
FOR LINE NUMBER 11A(1)

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NAME OF COMMITTEE (In Full)

CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MR. THOMAS DASHIELL 143 SPANISH PASS RD. BOERNE, TX 78006	N/A	04/19/00	\$ 385.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date: \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JONELL SIMS 26 Chimney Hollow Odessa, TX 79762	N/A	05/15/00 05/15/00 05/15/00	35.00 140.00 105.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Teacher	Aggregate Year-to-Date: \$ 330.00 330.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARY ALICE SMITH 202 AZALEA WAY MARSHALL, TX 75672	N/A	05/08/00 05/09/00	280.00 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Housewife	Aggregate Year-to-Date: \$ 310.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	

SUBTOTAL of Receipts This Page (optional) 1025.00

TOTAL This Period (last page this line number only) 8245.97

PAC ACCOUNT OPERATING EXPENSES

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE <u>1</u> OF <u>1</u>
	FOR LINE NUMBER <u>216</u>

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NAME OF COMMITTEE (in Full)
CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HYATT REGENCY HOUSTON 1200 LOUISIANA ST. HOUSTON, TX 77002	Lunch for approx. 1300 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/14/2000	\$22,542.02
B. Full Name, Mailing Address and ZIP Code GERALD SPEARS-WEST, INC. 12531 PRESTON WAY LOS ANGELES, CA 90066	200 lapel pins for women handed at lunch Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/18/2000	\$635.05
C. Full Name, Mailing Address and ZIP Code MRS. TERESA SPEARS 4710 ECK LANE AUSTIN, TX 78734	Reim. for copies made for Board Mtg. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/2000	\$67.66
D. Full Name, Mailing Address and ZIP Code HYATT REGENCY HOUSTON 1200 LOUISIANA ST. HOUSTON, TX 77002	Deposit for room for luncheon Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/2000	\$750.00
E. Full Name, Mailing Address and ZIP Code COMPASS BANK	PRINT NEW CHECKS + Deposit slips Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/28/2000	\$37.75 \$9.53
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	24,042.01
TOTAL This Period (last page this line number only)	24,042.01

FEDERAL CANDIDATES

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NOBLE WILLINGHAM P.O. BOX 1234 MINEOLA, TX 75773	Contribution TX CONG. DIST. 1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DANIEL S. POWER P.O. BOX 372152 EL PASO, TX 79937	Contribution TX CONG. DIST. 16 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$ 1000.00

TOTAL This Period (last page this line number only)

Contributions to State & local Candidates.

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DAVID PURYEAR 1200 San Antonio AUSTIN, TX 78701	Contribution 3rd Court of Appeals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 500.00
REBECCA SIMMONS P.O. Box 12408 SAN ANTONIO, TX 78212	Contribution 4th Court of Appeals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 500.00
JAY BRANDON P.O. Box 33254 SAN ANTONIO, TX 78265	Contribution 4th Court of Appeals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 500.00
TODD STAPLES P.O. Box 2208 PALESTINE, TX 75802	Contribution TX Senate, Dist. 3 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 2000.00
DR. BOB DEVELL P.O. Box 8609 GREENVILLE, TX 75404	Contribution TX Senate, Dist. 2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
WARREN LAWLESS P.O. Box 2004 HUMBLE, TX 77347	Contribution TX Senate, Dist. 15 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
BILL HOLLOWELL 322 N. Oleander St. Grand Saline, TX 75140	Contribution TX House, Dist. 5 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
WAYNE CHRISTIAN 204 Houston St Center, TX 75935	Contribution TX House, Dist. 9 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
PAUL WOODARD 2705 VENTURE VIEW DR. PALESTINE, TX 75801	Contribution TX House, Dist. 11 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 8500.00

TOTAL This Period (last page this line number only)

State & local candidates Continued -

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in full)

CLEO BOHLS FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BEN BIVS P.O. Box 1451 HUNTSVILLE, TX 77340	Contribution TX House, Dist. 18 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
MARY JANE AVERY 130 Summerwood Branham, TX 77706	Contribution TX House, Dist. 21 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 2000.00
JILL WARREN 111 CONGRESS, Ste. 2100 AUSTIN, TX 78701	Contribution TX HOUSE, DIST. 48 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
SID MILLER Rt. 1 Box 61 Stephenville, TX 76401	Contribution TX HOUSE, DIST. 59 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
TIM BLACKSHEAR 3104 Mt. Shadow BIG SPRING, TX 79721	Contribution TX HOUSE, DIST. 70 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
STEVE FRYAR 1711 VINCENT ST. BROWNWOOD, TX 76801	Contribution TX HOUSE, DIST. 73 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
VICTORIA FRAYSER 3901 ASCOT LANE HOUSTON, TX 77092	Contribution TX HOUSE, DIST. 138 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/00	\$ 1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$ 8000.00

TOTAL This Period (last page this line number only)

~~8000.00~~
\$ 16,500.00

