

PERSONAL FINANCIAL STATEMENT**FORM PFS
COVER SHEET**

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2010, covering calendar year ending December 31, 2009. ✓
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

Including 10 Supplemental: 52

ACCOUNT #

57897

OFFICE USE ONLY 2/16

Date Received

RECEIVED

FEB 16 2010

Texas Ethics Commission

Receipt #

HD (PM)

2-15-10

Amount

Date Processed
PROCESSED FEB 16 2010

Date Imaged

1 NAME

TITLE; FIRST; MI

SENATOR DAN

NICKNAME; LAST; SUFFIX

PATRICK

2 ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

201 VANDERPOOL LN #141
HOUSTON TX 77020☒ (CHECK IF FILER'S HOME ADDRESS)3 TELEPHONE
NUMBER

AREA CODE

PHONE NUMBER; EXTENSION

(713) 898 4881

4 REASON
FOR FILING
STATEMENT☐ CANDIDATE _____ (INDICATE OFFICE)☒ ELECTED OFFICER TX SENATOR DIST 7 (INDICATE OFFICE)☐ APPOINTED OFFICER _____ (INDICATE AGENCY)☐ EXECUTIVE HEAD _____ (INDICATE AGENCY)☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT☐ STATE PARTY CHAIR _____ (INDICATE PARTY)☐ OTHER _____ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity):

SPOUSE JANET LEA PATRICK

DEPENDENT CHILD 1. _____

2. _____

3. _____

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

R: 443106

SOURCES OF OCCUPATIONAL INCOME**PART 1A**☐ NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) Texas Senate 1400 N. CONGRESS 353 AUSTIN TX 78701 NATURE OF OCCUPATION SENATOR
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) Houston Broadcasting 11451 Katy Freeway Suite 215 Houston TX 77079 NATURE OF OCCUPATION RADIO
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) PAT RICH LLC 11451 Katy Freeway Suite 215 Houston TX 77079 NATURE OF OCCUPATION BUSINESS MANAGEMENT

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCCUPATIONAL INCOME**PART 1A**☐ NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) DAN & DAN MANAGEMENT 201 VANDERPOOL LN #141 Houston TX 77356 NATURE OF OCCUPATION Business Management
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) PATRICK BROADCASTING 11451 KATY Freeway Suite 215 Houston TX 77079 NATURE OF OCCUPATION Radio
INFORMATION RELATES TO	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check If Filer's Home Address) NATURE OF OCCUPATION

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

RETAINERS**PART 1B**

☒ NOT APPLICABLE

This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FEE RECEIVED FROM	NAME AND ADDRESS
2 FEE RECEIVED BY	NAME OF BUSINESS <input type="checkbox"/> FILER OR FILER'S BUSINESS _____ <input type="checkbox"/> SPOUSE OR SPOUSE'S BUSINESS _____ <input type="checkbox"/> DEPENDENT CHILD _____ OR CHILD'S BUSINESS _____
3 FEE AMOUNT	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED BY	NAME OF BUSINESS <input type="checkbox"/> FILER OR FILER'S BUSINESS _____ <input type="checkbox"/> SPOUSE OR SPOUSE'S BUSINESS _____ <input type="checkbox"/> DEPENDENT CHILD _____ OR CHILD'S BUSINESS _____
FEE AMOUNT	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK**PART 2**☐ NOT APPLICABLE

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 BUSINESS ENTITY	NAME GENERAL MOTORS			
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME RAM ENERGY			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME CWALT INC			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME EAGLE ROCK			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME TATA MOTORS			
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES & OTHER COMMERCIAL PAPER**PART 3**☐ NOT APPLICABLE

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 DESCRIPTION OF INSTRUMENT	CAPITAL ONE CD FALL Church
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	CAP one CD Glen Allen
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	Deutsche Bank Telek
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES & OTHER COMMERCIAL PAPER**PART 3**☐ NOT APPLICABLE

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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¹ DESCRIPTION OF INSTRUMENT	Dain Rauscher Money Market
² HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	Wells Fargo Money Market
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOTAPPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 MUTUAL FUND	NAME <i>Eagle Sec MID CAP</i>
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>Growth Fund America</i>
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>JPMORGAN MID CAP</i>
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY	

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 MUTUAL FUND	NAME <i>VANGUARD INDEX SMALL CAP</i>			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME <i>Dodge & Cox</i>			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME <i>Eagle Ser</i>			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 MUTUAL FUND	NAME VAN GUARD INDEX
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME Keeley Small CAP
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME JPMORGAN
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME 1 Shares TR Dow
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME VANGUARD INDEX TRUST
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME Keeley Small Cap
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY	

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 MUTUAL FUND	NAME T Rowe Price Equity
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME VANGUARD INDEX TOTAL MKT
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input checked="" type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME Dodge & Cox Fund
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME <i>Wells FARGO Mortgage Backed</i>			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
4 IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>T Rowe Price</i>			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input checked="" type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>JPMORGAN MID CAP</i>			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME <i>Growth Fund America</i>
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>Keeley Small Cap</i>
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME <i>Vanguard Index</i>
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY	

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME Eagle Ser			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME Keelley Small cap			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME VANGUARD			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS**PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME <i>Growth Fund America</i>			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME <i>T Rowe Price</i>			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**PART 5**☐ NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ SOURCE OF INCOME	NAME AND ADDRESS DAN & JAN MANAGEMENT 201 VANDERPOOL W #141 HOUSTON TX 77024
² RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ AMOUNT	<input checked="" type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS WELLS FARGO INVESTMENTS SEC 909 FANNIN HOUSTON TX 77010 1100
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input checked="" type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS 201 VANDERPOOL W #141 GOEB INVESTMENT HOUSTON TX 77024
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**PART 5**☐ NOTAPPLICABLE

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 SOURCE OF INCOME	NAME AND ADDRESS- DAN PATRICK IRA Dain Rauscher 15th Floor 2000 Sam Houston Parkway Houston
2 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input checked="" type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS DAN PATRICK IRA Dain Rauscher 15th Floor 2000 Sam Houston Pkwy Houston
RECEIVED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input checked="" type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS DAIN RAUSCHER 15th Floor 2000 SAM HOUSTON PARKWAY HOUSTON
RECEIVED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**PART 5**☐ NOTAPPLICABLE

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ SOURCE OF INCOME	NAME AND ADDRESS John Hancock Profit Sharing 11451 Katy Freeway Suite 215 401K Houston TX 77079
² RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input checked="" type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS John Hancock Profit Sharing 11451 Katy Freeway Suite 215 401K Houston TX 77079
RECEIVED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input checked="" type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
RECEIVED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS**PART 6**
☒ NOT APPLICABLE

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability *of more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
² LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ GUARANTOR	
⁴ AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN REAL PROPERTY**PART 7A**☐ NOT APPLICABLE

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input checked="" type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 201 VANDERPOOL LN #141 HOUSTON TX 77024
3 DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	DAN PATRICK JAN PATRICK
5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 151 WATERFRONT DR MONTGOMERY TX 77356
DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 2ND HOME
NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	DAN PATRICK JAN PATRICK TRUST RYAN PATRICK SHANE PATRICK
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES**PART 7B**☐ NOTAPPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) HOUSTON BROADCASTING 11451 KATY FREEWAY Suite 215 HOUSTON TX 77079
3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) PLAID SHIRT PICTURES PSP 11451 KATY FREEWAY Suite 215 HOUSTON TX 77079
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) Goeb INVESTMENTS LTD 201 VANDERPOOL LN #141 HOUSTON TX 77024
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES**PART 7B**☐ NOT APPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
² DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small> DALLAS BROADCASTING 11451 KATY Freeway Suite 215 Houston TEXAS 77079
³ IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small> PAT Rich LLC 11451 KATY Freeway Suite 215 Houston TX 77079
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small> DAN & DAN Management 11451 KATY Freeway Suite 215 Houston TX 77079
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES**PART 7B**☐ NOT APPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
² DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small> PATRICK BROADCASTING 11451 KATY FREEWAY Suite 215 HOUSTON TX 77079
³ IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small>
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<small>NAME AND ADDRESS (Check If Filer's Home Address)</small>
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

GIFTS**PART 8**☐ NOT APPLICABLE

Identify any person or organization that has given a gift *worth more than \$250* to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate, must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ DONOR	NAME AND ADDRESS JUDITH ZAFFERINI P.O. Box 627 1407 Washington St Laredo TX 78042
² RECIPIENT	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ DESCRIPTION OF GIFT	KINDLE READING DEVICE
DONOR	NAME AND ADDRESS
RECIPIENT	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION OF GIFT	
DONOR	NAME AND ADDRESS
RECIPIENT	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION OF GIFT	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY	

TRUST INCOME**PART 9**
☒ NOT APPLICABLE

Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received *more than \$500* in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ SOURCE	NAME OF TRUST
² BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
⁴ ASSETS FROM WHICH OVER \$500 WAS RECEIVED <input type="checkbox"/> UNKNOWN	
SOURCE	NAME OF TRUST
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED <input type="checkbox"/> UNKNOWN	
SOURCE	NAME OF TRUST
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED <input type="checkbox"/> UNKNOWN	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BLIND TRUSTS**PART 10A**
 NOT APPLICABLE

Identify each blind trust that complies with section 572.023(c) of the Government Code. See FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1	NAME OF TRUST	
2	TRUSTEE	NAME AND ADDRESS
3	BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
4	FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
5	DATE CREATED	
<hr/>		
	NAME OF TRUST	
	TRUSTEE	NAME AND ADDRESS
	BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
	FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
	DATE CREATED	
<hr/>		
	NAME OF TRUST	
	TRUSTEE	NAME AND ADDRESS
	BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
	FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
	DATE CREATED	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

TRUSTEE STATEMENT**PART 10B**

☒ NOT APPLICABLE

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1 NAME OF TRUST

2 TRUSTEE NAME

3 FILER ON WHOSE
BEHALF STATEMENT
IS BEING FILED

NAME

4 TRUSTEE STATEMENT

I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.

Trustee Signature

§ 572.023. Contents of Financial Statement in General

(b) The account of financial activity consists of:

(8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;

(14) identification of each blind trust that complies with Subsection (c), including:

(A) the category of the fair market value of the trust;

(B) the date the trust was created;

(C) the name and address of the trustee; and

(D) a statement signed by the trustee, under penalty of perjury, stating that:

(i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and

(ii) to the best of the trustee's knowledge, the trust complies with this section.

(c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:

(1) the trustee:

(A) is a disinterested party;

(B) is not the individual;

(C) is not required to register as a lobbyist under Chapter 305;

(D) is not a public officer or public employee; and

(E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and

(2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.

(d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS**PART 11A**☐ NOT APPLICABLE

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) Goeb Investments 11451 Katy Freeway Suite 215 Houston TX 77079																			
2 BUSINESS TYPE	INVESTMENTS																			
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____																			
4 ASSETS	<table border="1"> <thead> <tr> <th data-bbox="440 800 971 835">DESCRIPTION</th> <th data-bbox="971 800 1484 835">CATEGORY</th> </tr> </thead> <tbody> <tr> <td data-bbox="440 835 971 940">Cash</td> <td data-bbox="971 835 1484 940"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 940 971 1087">Marketable Securities</td> <td data-bbox="971 940 1484 1087"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1087 971 1234">Investment in Radio Station</td> <td data-bbox="971 1087 1484 1234"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1234 971 1381">Banks</td> <td data-bbox="971 1234 1484 1381"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1381 971 1528"></td> <td data-bbox="971 1381 1484 1528"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1528 971 1675"></td> <td data-bbox="971 1528 1484 1675"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1675 971 1822"></td> <td data-bbox="971 1675 1484 1822"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1822 971 1919"></td> <td data-bbox="971 1822 1484 1919"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> </tbody> </table>		DESCRIPTION	CATEGORY	Cash	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE	Marketable Securities	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE	Investment in Radio Station	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE	Banks	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
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COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

GOEB INVESTMENTS LTD. - INVESTMENTS HELD ON 12-31-09

Description	Ticker CUSIP #	Coupon Rate	Maturity Date
Abbott laboratories	ABT		
Allstate Corp	ALL		
Altria Group Inc	MO		
American Capital Ltd	ACAS		
American Intl Group	AIG		
Apple Inc	AAPL		
Applied Materials Inc	AMAT		
Archer-Daniels-Midlnd Co	ADM		
AT& T Inc	T		
Bank of America Corp	BAC		
Berkshire Hathaway Inc	BRK		
Best Buy Co.	BBY		
Boeing Co	BA		
BP PLC	BP		
Burlington Northern Sante Fe	BNI		
CVB Financial	CVBF		
Caterpillar Inc	CAT		
CEMEX SAB DE CV ADR	CX		
Chevron Corp	CVX		
CISCO SYSTEMS INC	CSCO		
CITI GROUP INC	C		
COCA-COLA COMPANY	KO		
CONOCOPHILLIPS	COP		
CONSTELLATION ENERGY	CEG		
CULLEN FORST BANKERS	CFR		
DEERE & CO	DE		
DIAMONDS TRUST I	DIA		
DOMINION RES INC	D		
DOMINO'S PIZZA INC	DPZ		
DOW CHEMICAL CO	DOW		
DRYSHIPS INC	DRYS		
EMC CORP MASS	EMC		
EBAY INC	EBAY		
ENTERPRISE PRODUCTS	EPD		
EXXON MOBIL CORP	XOM		
FANNIE MAE	FNM		
FORD MOTOR COMPANY	FNM		
FORTUNE BRANDS INC	FO		
FREEMPORT-MCMORAN	FCX		
GENERAL ELECTRIC CO	GE		
GOLDMAN SACHS GROUP	GS		
GOOGLE INC	GOOG		

HARTFORD FINL SVCS GR
 HEWLETT-PACKARD CO
 HONEYWELL INTL INC
 INTEL CORP INTC
 INTEDIGITAL INC
 INTERNATIONAL BUSINESS MACHINE CORP
 JOHNSON & JOHNSON
 JP MORGAN CHASE & CO
 KINETIC CONCEPTS INC
 KRAFT FOODS INC
 LEHMAN BROTHERS HOLDINGS
 MARATHON OIL CORP
 MCDONALDS CORP
 MERCK & CO INC
 METLIFE INC
 MICROSOFT CORP
 NORDICAMER TANKER SHIPPING
 PEPSICO INC
 PHILIP MORRIS INTERNATIONAL INC
 POWERSHARES QQQ ET
 RAM ENERGY RESOURCES INC
 RESEARCH IN MOTION LTD
 SPDR - TECHNOLOGY SELECT SECTOR
 SOUTHWEST AIRLINE CO
 SPDR GOLD TRUST
 SPDR TR UNIT SER 1
 SUBURBAN PROPANE PARTNERS LP
 SUN MICROSYSTEMS INC
 TEVA PHARMACEUTICAL
 UNITED PARCEL SERVICE
 US NATURAL GAS FUND
 WAL-MART STORES INC
 WEINGARTEN REALTY REIT INVESTORS
 WELLPPOINT INC
 WELLS FARGO COMPANY
 WYNDHAM WORLDWIDE CORP
 YUM BRANDS INC
 3COM CORP

HIG
 HPQ
 HON
 INTC
 IDCC
 IBM
 JNJ
 JPM
 KCI
 KFT
 LEHMQ
 MRO
 MCD
 MRK
 MET
 MSFT
 NAT
 PEP
 PM
 QQQQ
 RAME
 RIMM
 XLK
 LUV
 GLD
 SPY
 SPH
 JAVA
 TEVA
 UPS
 UNG
 WMT
 WRI
 WLP
 WFC
 WYN
 YUM
 COMS

Preferreds/Fixed Rate Cap Securities

FANNIE MAE SER T NON-CUM PERP PFD CALL
 FORD MOTOR CO CORTS CALLABLE
 GOODYEAR TIRE CBTCs
 MERRILL LYNCH CAP TRUST V PERPET TOPRS CALLABLE
 WEINGARTEN REALTY CALLABLE STRTING 09/15/14

FNM/T
 KSK
 XKK
 MERF
 WRD

8.250%
 7.400%
 8.000%
 7.280%
 8.100%

5/20/13
 11/1/46
 3/15/28
 9/30/08
 9/15/19

FIRST EAGLE FUNDS SOGEN OVERSEAS FUND CL I
 FRANKLIN INCOME FUND CLASS A
 FPA NEW INCOME INC
 GOLDMAN SACHS TR HIGH YIELD MUNICIPAL FD CL A
 GOLDMAN SACHS HY MUNI FD-I
 GROWTH FUND AMERICA CL F1
 HENDERSON INTL OPTYS CL A
 HARBOR BOND FUND
 HARRIS ASSOC INVT TR OAKMARK EQUITY & INCOME FD CL I
 HARTFORD MUTUAL FUNDS FLOATING RATE FUND CL I
 HARTFORD MUT FDS INC CAPITAL APPRECIATION FD CL I
 HARTFORD MUTUAL FDS FLOATING RATE FUND CL A
 HARTFORD MUTL FDS INC MIDCAP FUND CL I
 AMER FDS INC FD AMER CL F
 IVY FDS INC HIGH INCOME FD CL I
 IVY FUNDS INC SCIENCE & TECH FD CL A
 IVY FUNDS INC SCIENCE & TECH FD CL Y
 IVY FDS INC ASSET STRATEGY FD CL A
 IVY FDS INC HIGH INCOME FD CL A
 IVY FDS INC ASSET STRATEGY FD CL I
 JANUS INVT FD PERKINS MID CAP VALUE FD INSTL SHRS
 DRYDEN SHORT TERM CORP FUND CL Z
 JP MORGAN TR II HIGH YIELD FD CL A
 JP MORGAN TR II HIGH YIELD FD SELECT CL
 JP MORGAN TR I US LARGE CAP CORE PLUS FD SEL CL
 NEW PERSPECTIVE FUND INC-CLASS F1
 PIMCO UNCONSTRAINED BD FUND CL INSTITUTIONAL
 PIMCO FDS PAC INVT MGMT SER LOW DURATION FD INSTL CL
 PIMCO FDS PAC INVT MGMT SER TOTAL RETURN FD INSTL CL
 PIMCO SHORT TERM FD INST CL
 PRINCIPAL FDS INC HIGH YIELD FD CL A
 ROYCE FD PREMIER FD CL W
 TEMPLETON CHINA WORLD FD INC
 TEMPLETON GLOBAL BOND FUND CL A
 FPA CRESCENT PORTFOLIO I
 VANGUARD FIXED INCOME SECURITIES FUND SHORT THER CORP PORTFOLIO
 WELLS FARGE ADVANTAGE HIGH INCOME FUND CL-INVESTOR
 WELLS FARGO ADVANTAGE SHORT TERM HIGH YIELD BOND FD INV CL
 WESTERN ASSET FDS INC CORE PLUS BD PORT INSTL CL
 WESTER ASSET FDS INC CORE BD PORT INSTL CL

SGOIX
 FKINX
 FPNIX
 GHYAX
 GHYIX
 GFAFX
 HFOAX
 HABDX
 OAKBX
 HFLIX
 ITHIX
 HFLAX
 HFMIK
 IFAFX
 IVHIX
 WSTAX
 WSTYX
 WASAX
 WHIAX
 IVAEX
 JMIYX
 PIFZX
 OHYAX
 OHYFX
 JLP SX
 NPFFX
 PFUX
 PTL DX
 PTRX
 PTSHX
 CPHYX
 RPRWX
 TACWX
 TPINX
 FPACX
 VFSTX
 STHYX
 STHBX
 WACPX
 WATFX

CORP BONDS

SIMON PROPERTY GROUP LP NOTES	828807-BA-4	4.875%	3/18/10
GOLDMAN SACHS GROUP LP NOTES	38143-UBE-0	4.500%	6/15/10
HARTFORD FINL SVCS GROUP INC SENIOR NOTES	416515-AE-4	7.900%	6/15/10
ALCOA INC NOTES CALLABLE	013817-AB-7	7.375%	8/1/10
CENTERPOINT ENERGY INC GLOBAL NOTES SERIES B CALLABLE	15189-TAJ-6	7.250%	9/1/10
FORTUNE BRANDS INC NOTES	349631-AM-3	5.125%	1/15/11
HOME DEPOT INC SENIOR NOTES	437076-AN-2	5.200%	3/1/11
EL PASO CORP NOTES	28336-LAB-5	7.000%	5/15/11
VIACOM INC GLOBAL NOTES	925524-AQ-3	6.625%	5/15/11
XEROX CORP MEDIUM TERM NOTES EXTRAORDINARY CALL	98412-JBC-7	7.410%	5/16/11
ALCOA INC NOTES	013817-AD-3	6.500%	6/1/11
PRUDENTIAL FINANCIAL INC INTERNOTES SEMI-ANNUAL PAY	74432-ABF-6	5.000%	6/15/11
INTERNATIONAL TEL & TELEG CORP DEBENTURE CALLABLE	460470-AM-9	7.500%	7/1/11
GOODYEAR TIRE & RUBBER NOTES	382550-AH-4	7.857%	8/15/11
GENERAL MOTORS ACCEPT BONDS	370425-RX-0	6.875%	9/15/11
AT&T CORP GLOBAL SENIOR NOTES STEP CPN CALLABLE	001957-BC-2	7.300%	11/15/11
CONSTELLATION BRANDS INC NOTES CALLABLE	21036-PAC-2	8.125%	1/15/12
GENERAL MOTORS ACCEPT GLOBAL NOTES	370425-SC-5	7.000%	2/1/12
RJ REYNOLDS TOB HLDG NOTES	76182-KAN-5	7.250%	6/1/12
AMERICAN CAPITAL STRATEGY SENIOR NOTES	024937-AA-2	8.850%	8/1/12
GENERAL MOTORS ACCEPT CROP SMART NOTES MONTHLY PAY	37042-GC-38	7.125%	8/15/12
GENERAL MOTORS ACCEPT CROP SMART NOTES SEMI-ANNUAL PAY	37042-GC-79	7.250%	8/15/12
AUTOZONE INC SENIOR NOTES CALLABLE	053332-AC-6	5.875%	10/15/12
INTL PAPER CO GLOBAL NOTES CALLABLE	460146-BQ-5	5.850%	10/30/12
TESORO CORP SENIOR NOTES SER B CALLABLE	881609-AQ-4	6.250%	11/1/12
DELUXE CORP NOTES SEMI-ANNUAL PAY	248019-AC-5	5.000%	12/15/12
SEARS ROEBUCK ACCEPTANCE INTERNOTES SEMI-ANNUAL PAY	8124-JFAG-1	7.500%	12/15/12
SEARS ROEBUCK ACCEPTANCE INTERNOTES SEMI-ANNUAL PAY	8124-JFAC-0	7.400%	12/15/12
GENERAL MOTORS ACCEPT CORP SMART NOTES SEMI-ANNUAL PAY CALLABLE	37042-GV-52	6.800%	2/15/13
TOYS R US NOTES	892335-AK-6	7.875%	4/15/13
FUND AMERICAN COS INC NOTES CALLABLE	36077-BAA-5	5.875%	5/15/13
LEXMARK INTL IN SR NOTES CALLABLE	529772-AD-7	5.900%	6/1/13
CHESAPEAKE ENERGY CORP SENIOR NOTES	165167-BY-2	7.625%	7/15/13
ELECTRONIC DATA SYSTEMS NOTES CALLABLE	285661-AD-6	6.000%	8/1/13
MASSEY ENERGY CO SR NOTES CALLABLE	576203-AH-6	6.875%	12/15/13
TRINITY INDUSTRIES INC SENIOR NOTES CALLABLE	896522-AE-9	6.500%	3/15/14
JANUS CAPITAL GROUP INC SENIOR NOTES	47102-XAC-9	6.369%	4/15/14
L-3 COMMUNICATIONS CORP SR SUB NOTES CALLABLE	502413-AS-6	5.875%	1/15/15
ALLIED WASTE NORTH AMER-SENIOR NOTES SR B CALLABLE	01958-XBN-6	7.250%	3/15/15
FREEPORT-MCMORAN SENIOR NOTES CALLABLE	35671-DAR-6	8.250%	4/1/15
RYDER SYSTEM INC SR UNSECURED NOTES CALLABLE	78355-HJN-0	7.200%	9/1/15
L-3 COMMUNICATIONS CORP SR SUB NOTES CALLABLE	502413-AU-1	6.375%	10/15/15
FORD MOTOR CREDIT CO COBRA NOTES CALLABLE CRT PAY	34539-CKK-6	7.250%	7/20/17
GENERAL MOTOR ACCEPT CORP SMART NOTES SEMI ANNUAL PAY	37042-GC-87	7.500%	8/15/17
GENERAL MOTORS ACCEPT CORP SMART NOTES MONTHLY PAY CALLABLE	37042-GQ-74	7.400%	12/15/17

DOW CHEMICAL CO INTERNOTES
GENERAL MOTORS NOTES CALLABLE

26054-LGV-9
370442-AV-7
7.450%
8.100%
8/15/19
6/15/24

Municipal Bonds

PARIS TEX CTFB OBLIG FGIC B/E LT
EAST TEX HSG FIN CORP SNGL FAM MTG REV SER A OY=6.05%
MONT CO TX HLTH FAC DEV CORP HLTH HERITAGE MANOR ESCROW TO MATY
SEMINOLE TX INDPT SCH DIST SERA G/O UNLTD B/E
HURST EULESS BEDFORD TEX INDPT SCH DIST G/O UNLTD OID B/E PSF-GTD

699891-GM-3
275578-BF-8
613692-AB-8
816826-BK-6
4478166-P-6
5.600%
0.000%
0.000%
5.000%
4.750%
12/15/15
3/1/16
7/15/23
2/15/26
8/15/28

Foreign Bonds

DOW CAP B V GTD DEBENTURE
SEAGATE TECHNOLOGY HDD SR NOTE CALLABLE

260540-AB-5
81180-RAD-4
9.200%
6.375%
6/1/10
10/1/11

Close-End Mutual Funds

CALAMOS GLOBAL DYNAMIC INCOME FUND
COHEN & STEERS SELECT UTILITY FUND
COHEN & STEERS REIT AND UTILITY INCOM FUND
COHEN & STEERS OPPORTUNITY FD
DWS REEF REAL ESTATE FUND INC
DWS REEF REAL ESTATE FD II
EATON VANCE TAX-MANAGED GLOBAL DIVERSIFIED EQUITY INC
DWS DREMAN VALUE INCOME EDGE F
MORGAN STANLEY INDIA INVT FD
TEMPLETON DRAGON FUND INC
TEMPLETON RUSSIA & EAST EUROPEAN FD INC

CHW
UTF
RTU
FOF
SRQ
SRO
EXG
DHG
IIF
TDF
TRF

Open-End Mutual Funds

AIM GROWTH SER MID CAP EQUITY FD CL A
AIM TAX EXEMPT FDS INC HIGH INCOME MUN FD CL A
BLACKROCK EQUITY DIVIDED FD CL S
BLACKROCK GLOBAL ALLOC GLOBAL ALLOCATION INSTT
BOND FD AMER INC CL F-1
BURNHAM FINANCIAL INDUSTRIES FUND CL-A
CALAMOS INVT TR NEW HIGH YIELD CL A
CALAMOS INVT TR NEW CONVERTIBLE FD CL A
DWS DREMAN SMALL CAP VALUE CLASS A
DWS DREMAN SMALL CAP VALUE FUND INSTL CLASS
EVERGREEN ASSET ALLOC CL A
EVERGREEN ASSET ALLOC FD CL I
FAIRHOLME FUND
FIRST EAGLE FDS INC GLOBAL FD CL I
FIRST EAGLE GLOBAL INC GLOBAL FD CL A
FIRST EAGLE FDS INC OVERSEAS FD CL A

GTAGX
AHMAX
MSDVX
MALOX
BFAFX
BURFX
CHYDX
CCVIX
KDSAX
KDSIX
EAAFX
EAIFX
FAIRX
SGIIX
SGENX
SGOVX

GOEB INVESTMENTS SUMMARY OF HOLDINGS 12-31-2009

Description	Description line 2	Symbol	Coupon Rate	Maturity Date »	CUSIP
<u>MONEY MARKET FUNDS</u>					
US GOVT MONEY MARKET FUND	RBC RESERVE CLASS	TURXX			87505V-14-0
PRIME MONEY MARKET FUND	RBC RESERVE CLASS	TRMXX			87505V-18-1
<u>MUTUAL FUNDS</u>					
**PIMCO HIGH YIELD FUND-CL C		PHDCX			693390-35-3
**VANGUARD INDEX TRUST	TOTAL STOCK MARKET PORTFOLIO	VTSMX			922908-30-6
**VAN KAMPEN HIGH YIELD MUNI	CLASS C	ACTFX			92113R-30-9
**VANGUARD FIXED INCOME SECS	FD INC-HIGH YIELD CORP PORTFOL	VWEHX			922031-20-8
**DODGE & COX STOCK FUND		DODGX			256219-10-6
**EAGLE SER	MID CAP STK FD CL I	HMCJX			269858-84-1
**JPMORGAN MID CAP VALUE FUND	CL A	JAMCX			339128-30-8
**GROWTH FUND AMER INC	CL F1	GFAFX			399874-40-3
**KEELEY SMALL CAP VALUE FD	CL A	KSCVX			487300-50-1
**VANGUARD INDEX TRUST	SMALL CAPITLZATION GROWTH	VISGX			922908-82-7
<u>EXCHANGE TRADED FUNDS</u>					
VANGUARD INDEX FUNDS	VANGUARD TOTAL STOCK MARKET	VTI			922908-76-9
<u>PREFERRED STOCK</u>					
***ALLIANZ SE	8.375% UNDATED SUBORDINATED		8.375		018805-20-0
<u>MUNICIPAL BONDS</u>					
BELL CNTY TEX HEALTH FACS DEV	SCOTT & WHITE MEM HOSP		6	2/15/2010	078027-GT-0
CORNERSTONE NATL BK EASLEY	SOUTH CAROLINA C/D FDIC INS TO		4.2	3/16/2010	219246-AF-2
RENO NEV HOSP WASHOE MED	RENOWN REGL MED CTR F/K/A WASH		4	6/1/2010	759836-DU-0
BRYAN TEX CTFS OBLIG 2000	GENERAL PURPOSE		5.15	8/15/2010	117565-ZE-4
TYLER TEX JR COLLEGE DIST REV	HIGHER EDUCATION		3.75	8/15/2010	902307-GL-5
CINCO TEX MUN UTIL DIST NO 12	OTHER UTILITIES		5.25	9/1/2010	17239W-AL-0
TEXAS ST G/O RFDG-PUB FIN AUTH	TEXAS PUB FIN AUTH		5.5	10/1/2010	882720-UG-8
SEATTLE WASH MUN LT & PWR REV	ELECTRICITY AND PUBLIC POWER		5	11/1/2010	812642-7X-8
EL PASO CNTY TEX G/O CTFS	GENERAL PURPOSE		5	2/15/2011	283497-UY-9
ALEDO TEX INDPT G/O SCH DIST	PRIMARY/SECONDARY EDUCATION			2/15/2011	014464-GK-1
SIENNA PLANTATION MUN UTIL DIS	MUD#003 WATER AND SEWER		5	3/1/2011	82620T-EL-4
NORTH FOREST INDPT SCH DIST	PRIMARY/SECONDARY EDUCATION		6	8/15/2011	659414-HL-3
HENDERSON NEV G/O LOC IMPT	NO T-4(R)/GREEN VLY PROPERTIES		4.6	11/1/2011	425208-HZ-1
TRAVIS CNTY TEX HEALTH FACS	ASCENSION HLTH		5.75	11/15/2011	89438L-BB-3
HOUSTON TEX WTR SYS REV	WATER		7.4	12/1/2011	442438-QV-2
MIDWEST CITY OKLA G/O	GENERAL PURPOSE		5	2/1/2012	598291-JL-7
PANHANDLE TEX INDPT SCH DIST G	PRIMARY/SECONDARY EDUCATION		4	2/15/2012	698482-BG-0
TRAIL OF THE LAKES MUN UTIL DI	WATER AND SEWER		4	4/1/2012	892778-KL-4
HOUSTON TEX ARPT SYS REV REV R	AIRPORTS		4	7/1/2012	442348-Y5-1
PASCO CNTY FLA SCH DIST SALES	PRIMARY/SECONDARY EDUCATION		5	10/1/2012	70253Q-AF-6
LA JOYA TEX INDPT SCH DIST	PRIMARY/SECONDARY EDUCATION		3.25	2/15/2013	503462-QM-8
PECOS CNTY TEX COMB TAX AND RE	V CTFS OB 1997		5.5	2/1/2010	705268-HF-0
<u>CERTIFICATES OF DEPOSIT</u>					
FIRSTBANK P R SANTURCE	C/D FDIC INS TO LIMITS		4.5	8/22/2011	337629-YT-0
MORGAN STANLEY BK N A UTAH	C/D FDIC INS TO LIMITS		4.4	12/5/2011	61747M-SA-0
CAPITAL ONE BK GLEN ALLEN VA	C/D FDIC INS TO LIMITS 3 MONTH		0.49	2/21/2012	14041A-TQ-2
SALLIE MAE BK MURRAY UTAH	C/D FDIC INS TO LIMITS		4.6	12/17/2013	795450-HA-6
GE MONEY BK SALT LAKE CITY	UTAH INSTL C/D		4.1	12/30/2013	36159U-GW-0
HUNTINGTON NATL BK COLUMBUS	OHIO C/D FDIC 3MO LIBOR		0.531	2/1/2010	44643W-FY-1
<u>MORTGAGE BACK SECURITIES</u>					
CWALT INC	SERIES 2005-20CB CLASS 3A3		5.5	7/25/2035	12667G-QH-9
CHASE MORTGAGE FINANCE TRUST	MTGPC/SERIES 2006-S2		6	10/25/2036	16163B-BA-1
FIRST HORIZON MTG PASS- THRU	SERIES 2006-4 CLASS I-A-5		5.5	2/25/2037	32052U-AE-3

GOEB INVESTMENTS LTD. - 2009 SUMMARY OF SOLD SECURITIES

Description 1	Description 2	Description 4	Symbol	CUSIP	GAIN / LOSS
Common Stock					
AT & T INC			T	00206R-10-2	LOSS
ALLSTATE CORP			ALL	020002-10-1	LOSS
AMERICAN CAPITAL LTD			ACAS	02503Y-10-3	LOSS
AMER INTL GROUP INC				026874-10-7	LOSS
APPLE INC			AAPL	037833-10-0	GAIN
APPLIED MATERIALS INC			AMAT	038222-10-5	LOSS
BANK OF AMERICA CORP			BAC	060505-10-4	LOSS
BERKSHIRE HATHAWAY CL B				084670-20-7	LOSS
BEST BUY CO INC			BBY	086516-10-1	GAIN
BOEING CO			BA	097023-10-5	GAIN
C V B FINANCIAL			CVBF	126600-10-5	GAIN
CARDINAL HEALTH INC			CAH	14149Y-10-8	LOSS
CENTENNIAL COMM CORP				15133V-20-8	GAIN
CISCO SYS INC			CSCO	17275R-10-2	LOSS
CITIGROUP INC			C	172967-10-1	LOSS
CONOCOPHILLIPS			COP	20825C-10-4	GAIN
CONSTELLATION ENERGY			CEG	210371-10-0	GAIN
CONTINENTAL AIRLS CL B			CAL	210795-30-8	GAIN
CORNING INC			GLW	219350-10-5	LOSS
CULLEN FROST BANKERS INC			CFR	229899-10-9	GAIN
DRYSHIPS INC			DRYS	Y2109Q-10-1	GAIN
DEERE & CO			DE	244199-10-5	GAIN
DIAMONDS TRUST I			DIA	252787-10-6	GAIN
EMC CORP			EMC	268648-10-2	GAIN
EXPRESS SCRIPTS INC			ESRX	302182-10-0	GAIN
FANNIE MAE		ASSN	FNM	313586-10-9	LOSS
FEDEX CORPORATION			FDX	31428X-10-6	LOSS
FORD MOTOR COMPANY,DEL			F	345370-86-0	GAIN
8GENENTECH INC				368991-57-6	GAIN
GENERAL ELECTRIC COMPANY			GE	369604-10-3	LOSS
GENERAL MOTORS CORP				370442-10-5	LOSS
GOLDMAN SACHS GROUP INC			GS	38141G-10-4	LOSS
GOOGLE INC CL A			GOOG	38259P-50-8	GAIN
HALLIBURTON COMPANY			HAL	406216-10-1	GAIN
HEWLETT-PACKARD COMPANY			HPQ	428236-10-3	GAIN
I SHARES SILVER TRUST			SLV	46428Q-10-9	LOSS
INTEL CORP			INTC	458140-10-0	GAIN
JOHNSON & JOHNSON			JNJ	478160-10-4	LOSS
KINETIC CONCEPTS INC			KCI	49460W-20-8	LOSS
LOCKHEED MARTIN CORP			LMT	539830-10-9	GAIN
MARATHON OIL CORP			MRO	565849-10-6	LOSS
MCDONALDS CORP			MCD	580135-10-1	GAIN

MERCK & CO INC
MICROSOFT CORP
JPMORGAN CHASE & CO
NYSE EURONEXT
PEPSICO INCORPORATED
PFIZER INCORPORATED
POWERSHARES QQQ SER1 ETF
RAM ENERGY RESOURCES INC
RESEARCH IN MOTION LTD
ROHM & HAAS CO
PROSHR SHORT DOW 30 ETF
PROSHARES SHORT S&P 500
SOUTHWEST AIRLINES CO
SPDR TR UNIT SER 1
SPDR S&P SEMICONDUCTR ETF
TATA MOTORS LTD-SPNS ADR
THORNBURG MORTGAGE INC
TRANSOCEAN LTD
ULTRA SEMICONDUCTOR PRO
ULTRA PETROLEUM CORP
PRSHRS ULTRA S&P 500 ETF
UNITED PARCEL SERVICE-B
US NATURAL GAS FUND LP
WALGREEN COMPANY
WEINGARTEN RLTY INVS SBI
WYNDHAM WORLDWIDE CORP
XTO ENERGY INC
YUM BRANDS INC

Preferred Stock
FANNIE MAE 8.25% PRP PFD

REIT INVESTORS SHARES OF
ORDINARY SHARES
SPONSORED ADR
NON-CUM PERP PFD

CPN 8.250%

FNMT

313586-73-7

LOSS

589331-10-7 LOSS
594918-10-4 LOSS
46625H-10-0 GAIN
629491-10-1 LOSS
713448-10-8 LOSS
717081-10-3 LOSS
73935A-10-4 LOSS
75130P-10-9 LOSS
760975-10-2 LOSS
775371-10-7 GAIN
74347R-70-1 LOSS
74347R-50-3 LOSS
844741-10-8 LOSS
78462F-10-3 GAIN
78464A-86-2 GAIN
876568-50-2 GAIN
885218-80-0 LOSS
H8817H-10-0 GAIN
74347R-66-9 GAIN
903914-10-9 GAIN
74347R-10-7 GAIN
911312-10-6 LOSS
912318-10-2 GAIN
931422-10-9 GAIN
948741-10-3 LOSS
98310W-10-8 LOSS
98385X-10-6 LOSS
988498-10-1 GAIN

Corporate Bond/UIT

A T & T 6.00% 03/15/09
CONSTELLAT 6.125% 9/1/09
FMCC NTS 6.3% 5/20/10
GMAC 5.25% 8/15/09
GMAC 5% 8/15/09
GMAC NTS 7.20% 08/15/09
GTE NTS 7.51% 04/01/09
HOME DEPO 3.75% 09/15/09
IMPERIAL 7.125% 4/01/09
8INTL 5.85% 10/30/12
L-3 7.625% 6/15/12
MGM MIRAGE 6% 10/1/09
8JANUS CAP 5.875% 91511

BONDS
SENIOR NOTES
COBRA NOTES
SMARTNOTES
SMARTNOTES
SMART NTS PAYS SEMI-ANNUAL
NOTES
SENIOR NOTES
GLOBAL NOTES
GLOBAL NOTES
GLOBAL COMPANY GUARNT
SENIOR NOTES
SUBMITTED FOR TENDER

CPN 6.000% DUE 03/15/09
CPN 6.125% DUE 09/01/09
CPN 6.300% DUE 05/20/10
CPN 5.250% DUE 08/15/09
CPN 5.000% DUE 08/15/09
CPN 7.200% DUE 08/15/09
CPN 7.510% DUE 04/01/09
CPN 3.750% DUE 09/15/09
CPN 7.125% DUE 04/01/09
CPN 5.850% DUE 10/30/12
CPN 7.625% DUE 06/15/12
CPN 6.000% DUE 10/01/09
CPN 5.875% DUE 09/15/11

001967-AV-1 GAIN
210371-AJ-9 LOSS
34539C-FY-3 GAIN
3704A0-PA-4 GAIN
3704A0-PQ-9 GAIN
37042F-J3-3 LOSS
362320-AV-5 LOSS
437076-AL-6 GAIN
453144-AA-5 LOSS
46099A-EU-2 GAIN
502413-AJ-6 GAIN
552963-AF-8 GAIN
47199A-CL-1 GAIN

REGENCY CTRS 7.75 04/01/09	NOTE	CPN 7.750% DUE 04/01/09	75884R-AE-3	LOSS
SPRINT 6.375%05/01/09	NOTES	CPN 6.375% DUE 05/01/09	852060-AF-9	LOSS
8TEXTRON INC 4.5% 8/1/10	SENIOR NOTES	CPN 4.500% DUE 08/01/10	88399A-CX-7	GAIN
UNION CARB 6.7% 04/01/09	NOTES	CPN 6.700% DUE 04/01/09	905581-AV-6	LOSS
UNION CARB 6.7% 04/01/09	NOTES	CPN 6.700% DUE 04/01/09	905581-AV-6	LOSS
WASTE MGMT 6.875%5/15/09	NOTES	CPN 6.875% DUE 05/15/09	94106L-AE-9	GAIN
XEROX CORP 9.75% 1/15/09	US\$ SENIOR NOTES	CPN 9.750% DUE 01/15/09	984121-BG-7	GAIN

Municipal Bond/UIT				
HARRIS TX 0% 8/15/2020	OY=7% GENERAL OBLIGAION	CPN 0.000% DUE 08/15/20	414003-QC-0	GAIN
NORTH TX TWY 4.75%1/1/18	NORTH TWY SYS RV FGIC	CPN 4.750% DUE 01/01/18	662858-BX-6	BREAK EVEN

Mutual Fund (Closed)				
COHEN & STEERS SELECT UT	INFRASTRUCTURE FUND INC	UTF	19248A-10-9	LOSS
COHEN & STEERS REIT AND	UTILITY INCOM FUND	RTU	19247Y-10-8	LOSS
COHEN&STEERS OPP FD	OPPORTUNITY FD	FOF	19248P-10-6	LOSS
CLAYMORE DIVID & INCM FD	INCOME FUND	DCS	18385J-10-5	LOSS
E VANCE T/M GLBL DIV EQY	TAX-MANAGED GLOBAL	EXG	27829F-10-8	LOSS
DWS DREMAN VALUE INCOME	EDGE F	DHG	23339M-20-4	GAIN
DWS DREMAN VALUE INCOME	EDGE		23339M-10-5	LOSS
MS INDIA INVT FD INC	INVT FD	IIF	61745C-10-5	LOSS
NUVEEN TEXT QLTY MUN FD	INCOME MUN FD	NTX	670983-10-5	LOSS
TEMPLETON DRAGON FD INC	INC	TDF	88018T-10-1	LOSS

Mutual Fund (Open)				
BLACKROCK EQUITY DIV I	DIVIDEND FD	MADVX	09251M-50-4	LOSS
EVERGREEN ASSET ALL CLA	CLA	EAAFV	30023C-35-0	LOSS
FAIRHOLME FUND		FAIRX	304871-10-6	LOSS
FIRST EAGLE SOGEN GLBL A	INC GLOBAL FD CLA	SGENX	32008F-50-7	LOSS
FPA NEW INCOME CL I		FPNIX	302544-10-1	LOSS
GS FINL SQ MMKT INSTL	SQUARE MONEY MKT FD	FSMXX	38141W-23-2	BREAK EVEN
GROWTH FUND AMERICA CL F	CL F1	GFAFX	399874-40-3	LOSS
INCOME FUND AMER INC F	CLASS F-1	IFAFX	453320-40-0	LOSS
PKNS MD CP VAL INST	MID CAP VALUE FD INSTL	JMIVX	471023-58-0	LOSS
PIMCO TOTAL RETURN INSTL	MGMT SER TOTAL RETURN FD	PTRTX	693390-70-0	GAIN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN
RUSSELL MMKT FD S	CLASS S	RMVMXX	782493-70-4	BREAK EVEN

Information is obtained from sources we believe reliable, but cannot be guaranteed.
Please refer to your Wells Fargo Advisors, LLC monthly statement for actual holdings.

GOEB INVESTMENTS SUMMARY OF SOLD SECURITIES 2009

<u>Description</u>	<u>Description line 2</u>	<u>Symbol</u>	<u>Coupon Rate</u>	<u>Maturity Date</u>	<u>CUSIP</u>	<u>GAIN/LOSS BREAK EVEN</u>
<u>MUTUAL FUNDS</u>						
**DODGE & COX STOCK FUND		DODGX			256219-10-6	LOSS
**EAGLE SER	MID CAP STK FD CL I	HMCJX			269858-84-1	LOSS
**JPMORGAN MID CAP VALUE FUND	CL A	JAMCX			339128-30-8	LOSS
**GROWTH FUND AMER INC	CL F1	GFAFX			399874-40-3	LOSS
**KEELEY SMALL CAP VALUE FD	CL A	KSCVX			487300-50-1	LOSS
**VANGUARD INDEX TRUST	SMALL CAPITLZATION GROWTH	VISGX			922908-82-7	LOSS
**HIGHLAND FLOATING RATE	ADVANTAGE FD CL C	XLACX			430097-30-3	LOSS
**VANGUARD INDEX TRUST	TOTAL STOCK MARKET PORTFOLIO	VTSMX			922908-30-6	GAIN
<u>EXCHANGE TRADED FUNDS</u>						
ISHARES TRUST BARCLAYS 1-3	YEAR TREASURY BD FD	SHY			464287-45-7	LOSS
<u>COMMON STOCK</u>						
CONTINENTAL AIRLINES INC-CL B		CAL			210795-30-8	GAIN
***ULTRA PETROLEUM CORP		UPL			903914-10-9	GAIN
<u>MUNICIPAL BONDS</u>						
MAGNOLIA TEX INDPT SCH DIST	PRIMARY/SECONDARY EDUCATION			8/15/11	559686-QN-3	BREAK EVEN
MAGNOLIA TEX INDPT SCH DIST RE	PRIMARY/SECONDARY EDUCATION			8/15/11	559686-QY-9	BREAK EVEN
PECOS CNTY TEX COMB TAX AND RE	V CTFS OB 1997		5.5	2/1/10	705268-HF-0	BREAK EVEN
MESA ARIZ STR & HWY REV SER	STREETS/HIGHWAYS			7/1/12	590536-AN-8	BREAK EVEN
CORPUS CHRISTI TEX UTIL SYS	COMBINED UTILITIES			7/15/16	220245-FM-1	BREAK EVEN
TRINITY RIVER AUTH TEX TEN MIL				8/1/09	896576-HJ-7	BREAK EVEN
KILLEEN TEX G/O RFDG	GENERAL PURPOSE			8/1/10	494134-PS-2	BREAK EVEN
SEATTLE WASH	UNREFUNDED BAL-REF-IMPT		5	7/1/09	812626-RG-6	BREAK EVEN
SEATTLE WASH	PREREFUNDED-REF & IMPT-L G/O		5	7/1/09	812626-QU-6	BREAK EVEN
HIGHLANDS RANCH MET DIST NO 2	G. O. REF BDS 1996		6.5	6/15/09	430901-CL-0	LOSS
<u>CERTIFICATES OF DEPOSIT</u>						
PNC N A PITTSBURGH PA	INSTL C/D		1.454	7/29/09	69347D-DY-1	GAIN
SILVERTON BK NATLASSN ATLANTA	GA C/D FDIC INS TO LIMITS			9/10/13	82846L-CT-4	BREAK EVEN
BANK CASTILE N Y	C/D FDIC INS TO LIMITS		2.7	3/5/09	061077-AR-4	GAIN
FIRST INDPT BK VANCOUVER WASH	C/D FDIC INS TO LIMITS		3.6	9/11/09	32057A-BQ-4	BREAK EVEN
NATIONAL BANK S C SUMTER	C/D FDIC INS TO LIMITS		3.75	5/5/09	634518-BR-4	BREAK EVEN
FIRST TENN BK N A MEMPHIS TENN	INSTL C/D FDIC INS TO LIMITS		0.433	12/17/09	3371F1-ES-8	GAIN
WACHOVIA BK NATIONAL ASSN	C/D FDIC INSURED TO LIMITS		5.029	1/12/09	92976E-MB-9	GAIN
SUNTRUST BK ATLANTA GA	C/D FDIC INS TO LIMITS		0.294	11/6/09	86787A-RQ-0	GAIN
<u>MORTGAGE BACK SECURITIES</u>						
CHASE MORTGAGE FINANCE TRUST	MTGPC/SERIES 2006-S2		6	10/25/36	16163B-BA-1	LOSS
FIRST HORIZON MTG PASS- THRU	SERIES 2006-4 CLASS I-A-5		5.5	2/25/37	32052U-AE-3	GAIN
CWALT INC	SERIES 2005-20CB CLASS 3A3		5.5	7/25/35	12667G-QH-9	GAIN

ASSETS OF BUSINESS ASSOCIATIONS**PART 11A**☐ NOTAPPLICABLE

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) PAT RICH LLC 11451 KATY Freeway Suite 215 HOUSTON TX 77079																			
2 BUSINESS TYPE	Business Management																			
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____																			
4 ASSETS	<table border="1"> <thead> <tr> <th data-bbox="440 787 974 829">DESCRIPTION</th> <th data-bbox="974 787 1494 829">CATEGORY</th> </tr> </thead> <tbody> <tr> <td data-bbox="440 829 974 934">CASH</td> <td data-bbox="974 829 1494 934"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input checked="" type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 934 974 1081">Investment in Radio Station</td> <td data-bbox="974 934 1494 1081"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1081 974 1228"></td> <td data-bbox="974 1081 1494 1228"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1228 974 1375"></td> <td data-bbox="974 1228 1494 1375"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1375 974 1522"></td> <td data-bbox="974 1375 1494 1522"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1522 974 1669"></td> <td data-bbox="974 1522 1494 1669"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1669 974 1816"></td> <td data-bbox="974 1669 1494 1816"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> <tr> <td data-bbox="440 1816 974 1917"></td> <td data-bbox="974 1816 1494 1917"> <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE </td> </tr> </tbody> </table>		DESCRIPTION	CATEGORY	CASH	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input checked="" type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE	Investment in Radio Station	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
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COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS**PART 11A**☐ NOT APPLICABLE

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) DAN J LAW MANAGEMENT 261 VANDER POOL Lw #141 HOUSTON TX 77024	
2 BUSINESS TYPE	Business Partnership	
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 ASSETS	DESCRIPTION CASH Investment IN RADIO STATIONS Banks Market Securities STOCKS RENT SALES	CATEGORY <input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input checked="" type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS**PART 11A**☐ NOT APPLICABLE

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) PATRICK BROAD CASTING 11451 KATY Freeway Suite 215 Houston TX 77075	
2 BUSINESS TYPE	RADIO STATION	
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 ASSETS	DESCRIPTION RADIO STATION	CATEGORY <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PART 11B

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXECUTIVE POSITIONS**PART 12**☐ NOTAPPLICABLE

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ ORGANIZATION	PAT Rich LLC
² POSITION HELD	MANAGING PARTNERS
³ POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	GoeB Investment LTD
POSITION HELD	MANAGING PARTNER
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Dau + Jan Management
POSITION HELD	MANAGING PARTNER
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Houston Broadcasting
POSITION HELD	Pres
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	PATRICK BROADCASTING
POSITION HELD	Pres
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXECUTIVE POSITIONS**PART 12**☐ NOT APPLICABLE

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ ORGANIZATION	DALLAS BROADCASTING		
² POSITION HELD	Pres		
³ POSITION HELD BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Be An Angel		
POSITION HELD	BOARD Member		
POSITION HELD BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION**PART 13**☒ NOT APPLICABLE

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

¹ PROVIDER	NAME AND ADDRESS
² AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST**PART 14**☒ NOT APPLICABLE

Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE.

¹ BUSINESS ENTITY	NAME AND ADDRESS
² INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

PART 15

☒ NOT APPLICABLE

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE.

¹ PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
² FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

**REPRESENTATION BY LEGISLATOR BEFORE
STATE AGENCY****PART 16**☒ NOT APPLICABLE

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

¹ STATE AGENCY	
² PERSON REPRESENTED	
³ FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17
☒ NOT APPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS--INSTRUCTION GUIDE.

¹ SOURCE OF BENEFIT	NAME AND ADDRESS
² BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LEGISLATIVE CONTINUANCES**PART 18**☒ NOT APPLICABLE

Identify any legislative continuance that you have applied for or obtained under section 30.003 of the Civil Practice and Remedies Code, or under another law or rule that requires or permits a court to grant continuances on the grounds that an attorney for a party is a member or member-elect of the legislature.

¹ NAME OF PARTY REPRESENTED	
² DATE RETAINED	
³ STYLE, CAUSE NUMBER, COURT & JURISDICTION	
⁴ DATE OF CONTINUANCE APPLICATION	
⁵ WAS CONTINUANCE GRANTED?	<input type="checkbox"/> YES <input type="checkbox"/> NO

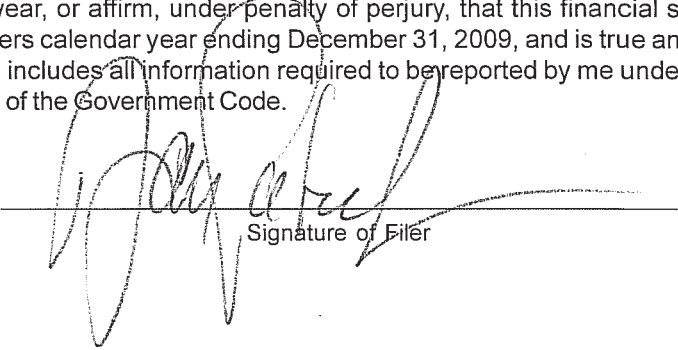
NAME OF PARTY REPRESENTED	
DATE RETAINED	
STYLE, CAUSE NUMBER, COURT, & JURISDICTION	
DATE OF CONTINUANCE APPLICATION	
WAS CONTINUANCE GRANTED?	<input type="checkbox"/> YES <input type="checkbox"/> NO

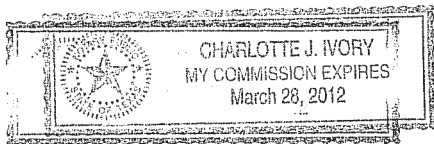
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

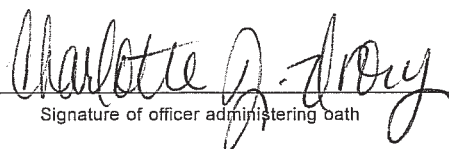
I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2009, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.


Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said DAN PATRICK, this the 10th day of February, 20 10, to certify which, witness my hand and seal of office.


Signature of officer administering oath

Charlotte Ivory
Print name of officer administering oath

Title of officer administering oath