

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 ACCOUNT # 00020036	2 PAGE # 1 of 15
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3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR Rep. FIRST Frank J. MI NICKNAME LAST Corte SUFFIX Jr.	OFFICE USE ONLY				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final Report	Date Received Date Hand-delivered or Date Postmarked <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Receipt #</td> <td style="width: 50%; padding: 2px;">Amount</td> </tr> <tr> <td style="padding: 2px;">Legal</td> <td style="padding: 2px;">Totals</td> </tr> </table> Date Processed Date Imaged	Receipt #	Amount	Legal	Totals
Receipt #	Amount					
Legal	Totals					
5 ORIGINAL PERIOD COVERED	Month Day Year Month Day Year 02/25/2008 THROUGH 06/30/2008					

6 EXPLANATION OF CORRECTION

Unintentionally the occupation employer and job title information of contributors were not entered before the report was sent to the Ethics Commission electronically. The correction was made before the deadline for this report.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Frank Corte Jr. _____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by _____ this the ____ day of _____, 20____, to certify which, witness my hand and seal of office.

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Corte, Frank J. Jr. (Rep.)

15 ACCOUNT # (Ethics Commission filers)
00020036

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	105.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	42,380.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	39,284.54
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	162,368.02
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 AFFIDAVIT

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

Frank Corte Jr.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/9 Report: 4/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 02/28/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) A&M PAC 6 Contributor address; City; State; Zip Code Austin, TX 78768	7 Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/10/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Acosta, Sharron (Dr.) Contributor address; City; State; Zip Code Sequin, TX 78155	Amount of contribution (\$) \$75.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Alamo Urology Associates	
Date 02/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen Boone Humphries LLP Contributor address; City; State; Zip Code Houston, TX 77027	Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anadarko Petroleum Corp PAC Contributor address; City; State; Zip Code Houston, TX 77251	Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/06/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arambula, Michael & Mary Zuelzer (Drs.) Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physicians		Employer (See Instructions) Self-employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/9 Report: 5/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 02/28/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Associated Builders & Contractors Inc PAC 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/10/2008	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# C00142711) Boeing PAC Contributor address; City; State; Zip Code Arlington, VA 22209	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/03/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capelo, Jaime (Mr.) Contributor address; City; State; Zip Code Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions) Self Employed	
Date 02/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covarrubias, David & Barbara (Mr. and Mrs.) Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Consultant Engineer		Employer (See Instructions) Self Employed	
Date 02/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Dan (Mr.) Contributor address; City; State; Zip Code Houston, TX 77210	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Corporate Officer		Employer (See Instructions) EPCO Inc	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/9 Report: 6/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 02/29/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Durden, Don & Suan (Mr. and Mrs.) 6 Contributor address; City; State; Zip Code Comfort, TX 78013	7 Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consulting Engineer		10 Employer (See Instructions) Self Employed	
Date 04/14/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Energy Transfer Partners Texas PAC Contributor address; City; State; Zip Code Houston, TX 77002	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) FEAPAC Contributor address; City; State; Zip Code Austin, TX 78728	Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/03/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friends of The University PAC Contributor address; City; State; Zip Code Austin, TX 78763	Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/07/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Girdley, John and Shandelle (Mr. and Mrs.) Contributor address; City; State; Zip Code San Antonio, TX 78220	Amount of contribution (\$) \$1,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Alamo Fireworks	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/9 Report: 7/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 03/04/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland and Knight LLP PAC 6 Contributor address; City; State; Zip Code San Antonio, TX 78205	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) IDENPAC Contributor address; City; State; Zip Code Round Rock, TX 78680	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) IEC of Texas PAC Fund Contributor address; City; State; Zip Code Austin, TX 78716	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lloyd Gosselink Blevins Rochelle & Townsend Contributor address; City; State; Zip Code Austin, TX 78767	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norstrom, Dan (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investment Counselor		Employer (See Instructions) Self Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/9 Report: 8/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 02/28/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orsinger, Charles (Mr.) 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Orsinger Auto	
Date 02/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patriots of Texas PAC Contributor address; City; State; Zip Code Houston, TX 77007	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pfeiffer, Joe (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Renewable Energy Contractor		Employer (See Instructions) Self Employed	
Date 02/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raba-Kistner PAC Contributor address; City; State; Zip Code San Antonio, TX 78269	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rayteon Texas PAC Contributor address; City; State; Zip Code San Antonio, TX 75042	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/9 Report: 9/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 03/03/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) San Antonio Board of Realtors 6 Contributor address; City; State; Zip Code San Antonio, TX 78239	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) San Antonio Firefighters Assoc. PAC Contributor address; City; State; Zip Code San Antonio, TX 78701	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) San Antonio Police Officers Association PAC Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sander, Lindsay (Mrs.) Contributor address; City; State; Zip Code Woodlands, TX 77380	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Governmental Relations		Employer (See Instructions) Self Employed	
Date 02/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texans for Rick Perry Contributor address; City; State; Zip Code Austin, TX 78768	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/9 Report: 11/15	
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036	
4 Date 03/11/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Credit Union League PAC 6 Contributor address; City; State; Zip Code Dallas, TX 75265	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Dental Association PAC Contributor address; City; State; Zip Code Austin, TX 78704	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/10/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code San Antonio, TX 76702	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Wildlife Association PAC Contributor address; City; State; Zip Code San Antonio, TX 78218	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/21/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) The Chickasaw Nation Contributor address; City; State; Zip Code Ada, OK 74821	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 9/9 Report: 12/15

2 FILER NAME Corte, Frank J. Jr. (Rep.)

3 ACCOUNT # (Ethics Commission filers)

00020036

4 Date

03/01/2008

5 Full name of contributor out-of-state PAC (ID# _____)
TSCPA

6 Contributor address; City; State; Zip Code
Dallas, TX 75254

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

03/17/2008

Full name of contributor out-of-state PAC (ID# C00093054)
Wal Mart Stores PAC for Responsible Government

Contributor address; City; State; Zip Code
Bentonville, AR 72716

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/29/2008

Full name of contributor out-of-state PAC (ID# _____)
Yates, Richard & Faye (Mr. and Mrs.)

Contributor address; City; State; Zip Code
New Braunfels, TX 78132

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Recording Artist

Employer (See Instructions)
Self Employed

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 13/15
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036
4 Date 03/04/2008	5 Payee name AT&T Wireless Services 6 Payee address; City; State; Zip Code P.O. Box 650574 Dallas, TX 75265	7 Amount (\$) \$346.82
8 Purpose of payment (See instructions regarding type of information required.) Telephone Charges (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/05/2008	Payee name AT&T Wireless Services Payee address; City; State; Zip Code P.O. Box 650574 Dallas, TX 75265	Amount (\$) \$324.65
Purpose of payment (See instructions regarding type of information required.) Telephone Charges (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 03/10/2008	Payee name Elections Support Services Payee address; City; State; Zip Code 5309 McCullough San Antonio, TX 78212	Amount (\$) \$11,567.43
Purpose of payment (See instructions regarding type of information required.) Turnkey Mailing Services - 3rd Mailer (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 03/10/2008	Payee name Elections Support Services Payee address; City; State; Zip Code 5309 McCullough San Antonio, TX 78212	Amount (\$) \$3,000.00
Purpose of payment (See instructions regarding type of information required.) Media Production: Television spot (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 14/15
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036
4 Date 03/10/2008	5 Payee name Elections Support Services 6 Payee address; City; State; Zip Code 5309 McCullough San Antonio, TX 78212	7 Amount (\$) \$2,700.00
8 Purpose of payment (See instructions regarding type of information required.) Media Placement: North Central Weekly (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/15/2008	Payee name Elections Support Services Payee address; City; State; Zip Code 5309 McCullough San Antonio, TX 78212	Amount (\$) \$17,599.64
Purpose of payment (See instructions regarding type of information required.) Phonebank Services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/29/2008	Payee name Elections Support Services Payee address; City; State; Zip Code 5309 McCullough San Antonio, TX 78212	Amount (\$) \$1,500.00
Purpose of payment (See instructions regarding type of information required.) E-Day Palmcards (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/16/2008	Payee name Republican Party of Texas Payee address; City; State; Zip Code 900 Congress Ave Suite #300 Austin, TX 78701	Amount (\$) \$850.00
Purpose of payment (See instructions regarding type of information required.) Ad for State Convention (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/3 Report: 15/15
2 FILER NAME Corte, Frank J. Jr. (Rep.)		3 ACCOUNT # (Ethics Commission filers) 00020036
4 Date 06/05/2008	5 Payee name Republican Party of Texas 6 Payee address; City; State; Zip Code 900 Congress Ave Suite #300 Austin, TX 78701	7 Amount (\$) \$735.00
8 Purpose of payment (See instructions regarding type of information required.) Banquet and prayer breakfast tickets at State Republican Convention. (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 06/14/2008	Payee name Texas Federation of Republican Women Payee address; City; State; Zip Code 900 Congress Ave Suite #300 Austin, TX 78701	Amount (\$) \$425.00
Purpose of payment (See instructions regarding type of information required.) Banquet tickets for Tribute of Women Banquet\n (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/01/2008	Payee name Texas House of Representatives Payee address; City; State; Zip Code P.O. 2910 Austin, TX 78268	Amount (\$) \$236.00
Purpose of payment (See instructions regarding type of information required.) Texas Flags (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held: