


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 20
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST David	MI
	NICKNAME	LAST Goldberg	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	4979 Dumfries Houston, TX 77096-4229		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Edgar	MI
	NICKNAME	LAST Goldberg	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	819 Lovett Houston, TX 77006		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/16/2007		04/12/2007
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	
	05/12/2007	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Houston City Council Atlarge 3
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

OFFICE USE ONLY	
Date Received	
	
Date Hand Delivered or Date Postmarked	
Receipt #	Amount
Date Processed	
Date Imaged	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Goldberg, David (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00000001

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 6,216.40

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 35.46

4. TOTAL POLITICAL EXPENDITURES \$ 3,843.40

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2,373.00

OUTSTANDING LOAN TOTALS

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

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 14 day of April, 2009, to certify which, witness my hand and seal of office.

[Signature] Precious C. Lang
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: 1/8 Report: 3/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Aly, David (Mr.)	7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77070			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 01/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Goldberg, David (Mr.)	7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77096-4229			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8 Report: 4/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 03/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Goldberg, David (Mr.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77096-4229	7 Amount of contribution (\$) \$2,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 01/25/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Goldberg, Ilse (Mrs.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77035	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/8 Report: 5/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 01/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Goldberg, Mark (Mr.)	7 Amount of contribution (\$) \$96.80	
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77036			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jacobson, Donald (Mr.)	7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77027			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/8 Report: 6/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/28/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Levinson, Leon (Mr.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77096	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 01/23/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Loring, Marsha (Ms.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024	7 Amount of contribution (\$) \$96.80	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/8 Report: 7/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/23/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Miller, Stuart (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 03/30/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nasr, Moe (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77064-3425	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/8 Report: 8/20

2 FILER NAME Goldberg, David (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

01/25/2007

5 Full name of contributor out-of-state PAC(ID# _____)
Pasternack, Jeane (Mr.)

7 Amount of contribution (\$)

\$96.80

6 Contributor address; City; State; Zip Code
Houston, TX 77005

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

04/03/2007

5 Full name of contributor out-of-state PAC(ID# _____)
Sklar, Larry (Mr.)

7 Amount of contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code
Houston, TX 77096

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 7/8 Report: 9/20	
2 FILER NAME Goldberg, David (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Solomon, Stuart (Dr.)			7 Amount of contribution (\$) \$126.00	
6 Contributor address; City; State; Zip Code Houston, TX 77005					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 03/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stein, Margerie (Mrs.)			7 Amount of contribution (\$) \$300.00	
6 Contributor address; City; State; Zip Code Houston, TX 77096					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable) Deserts		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/8 Report: 10/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) UUUUUU01	
4 Date 04/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Voraberger, Nicole (Mrs.)	7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77004-3454			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

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

1 PAGE #
Schedule: 1/10 Report: 11/20

2 FILER NAME Goldberg, David (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name City of Houston	7 Amount (\$)
03/01/2007	6 Payee address; City; State; Zip Code 901 Bagby Houston, TX 77002	\$1.70

8 Purpose of payment (See instructions regarding type of information required.) Parking at City Hall	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
<input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date	5 Payee name City of Houston	7 Amount (\$)
03/05/2007	6 Payee address; City; State; Zip Code 901 Bagby Houston, TX 77002	\$500.00

8 Purpose of payment (See instructions regarding type of information required.) Filing Fee	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
<input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/10 Report: 12/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 03/07/2007	5 Payee name City of Houston 6 Payee address; City; State; Zip Code 901 Bagby Houston, TX 77002	7 Amount (\$) \$1.50	
8 Purpose of payment (See instructions regarding type of information required.) Parking <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location		12 Departure date	13 Destination city / location
15 Means of transportation		16 Purpose of travel	
4 Date 04/07/2007	5 Payee name Dell 6 Payee address; City; State; Zip Code 1 Dell Way Round Rock, TX 78682	7 Amount (\$) \$323.67	
8 Purpose of payment (See instructions regarding type of information required.) Refurbished Dell Multifunction Laser 1815dn <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location		12 Departure date	13 Destination city / location
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

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

1 PAGE #
Schedule: 3/10 Report: 13/20

2 FILER NAME Goldberg, David (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name Fedex Kinkos	7 Amount (\$)
01/24/2007	6 Payee address; City; State; Zip Code 4834b Beechnut St Houston, TX 77096	\$8.88

8 Purpose of payment (See instructions regarding type of information required.) Copies of petition <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
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15 Means of transportation	16 Purpose of travel
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4 Date	5 Payee name Fedex Kinkos	7 Amount (\$)
02/28/2007	6 Payee address; City; State; Zip Code 4834b Beechnut S Houston, TX 77096	\$21.65

8 Purpose of payment (See instructions regarding type of information required.) Copies of Petition <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
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15 Means of transportation	16 Purpose of travel
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/10 Report: 14/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) UUUUUUU1	
4 Date 03/20/2007	5 Payee name Franks, Michael (Mr.) 6 Payee address; City; State; Zip Code 404 IH-45 Huntsville, TX 77488	7 Amount (\$) \$740.00	
8 Purpose of payment (See instructions regarding type of information required.) Deposit for 500 Yard Signs <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 03/29/2007	5 Payee name Franks, Michael (Mr.) 6 Payee address; City; State; Zip Code 404 IH-45 Huntsville, TX 77488	7 Amount (\$) \$835.86	
8 Purpose of payment (See instructions regarding type of information required.) Final Payment on 500 yardsigns <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/10 Report: 15/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/05/2007	5 Payee name Franks, Michael (Mr.) 6 Payee address; City; State; Zip Code 404 IH-45 Huntsville, TX 77466	7 Amount (\$) \$1,055.00	
8 Purpose of payment (See instructions regarding type of information required.) 20 4'x8' Signs and 100 Bumper Stickers <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 02/01/2007	5 Payee name Harris County Clerk Houston, TX 77002 6 Payee address; City; State; Zip Code	7 Amount (\$) \$102.48	
8 Purpose of payment (See instructions regarding type of information required.) Prior Election Database <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/10 Report: 16/20
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 01/17/2007	5 Payee name Harris County Tax-Assesor 6 Payee address; City; State; Zip Code 1001 Preston St Houston, TX 77002	7 Amount (\$) \$25.00
8 Purpose of payment (See instructions regarding type of information required.) Harris County Voter Registration Database <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)		
11 Departure city / location	12 Departure date	13 Destination city / location
15 Means of transportation		14 Arrival date
15 Means of transportation		16 Purpose of travel
4 Date 03/16/2007	5 Payee name Kroger Grocery 6 Payee address; City; State; Zip Code 10306 S Post Oak, Houston, TX 77096	7 Amount (\$) \$10.05
8 Purpose of payment (See instructions regarding type of information required.) Office Supplies <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)		
11 Departure city / location	12 Departure date	13 Destination city / location
15 Means of transportation		14 Arrival date
15 Means of transportation		16 Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/10 Report: 17/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) UUUUUUU1	
4 Date 01/27/2007	5 Payee name Office Max 6 Payee address; City; State; Zip Code 270 Meyerland Plaza Mall Houston, TX 77096	7 Amount (\$) \$14.61	
8 Purpose of payment (See instructions regarding type of information required.) 150 B&W Brochures <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 01/29/2007	5 Payee name Office Max 6 Payee address; City; State; Zip Code 270 Meyerland Plaza Mall Houston, TX 77096	7 Amount (\$) \$14.61	
8 Purpose of payment (See instructions regarding type of information required.) Copies of brochures <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 8/10 Report: 18/20	
2 FILER NAME Goldberg, David (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/20/2007	5 Payee name Office Max			7 Amount (\$) \$10.83	
6 Payee address; City; State; Zip Code 270 Meyerland Plaza Mall Houston, TX 77096					
8 Purpose of payment (See instructions regarding type of information required.) Brochures <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 04/02/2007	5 Payee name Office Max			7 Amount (\$) \$64.94	
6 Payee address; City; State; Zip Code 270 Meyerland Plaza Mall Houston, TX 77096					
8 Purpose of payment (See instructions regarding type of information required.) DeLorme Street Atlas Plus 2007 (Mapping Software) <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/10 Report: 19/20

2 FILER NAME Goldberg, David (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 04/03/2007	5 Payee name Office Max 6 Payee address; City; State; Zip Code 270 Meyerland Plaza Houston, TX 77096	7 Amount (\$) \$46.01
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8 Purpose of payment (See instructions regarding type of information required.) 250 B&W Brochures <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 03/27/2007	5 Payee name United States Postal Service 6 Payee address; City; State; Zip Code 5350 Bellaire Blvd Bellaire, TX 77401	7 Amount (\$) \$21.06
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8 Purpose of payment (See instructions regarding type of information required.) First-Class Stamps <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/10 Report: 20/20	
2 FILER NAME Goldberg, David (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/05/2007	5 Payee name Walmart 6 Payee address; City; State; Zip Code 9555 So. Post Oak Road Houston, TX 77096	7 Amount (\$) \$10.09	
8 Purpose of payment (See instructions regarding type of information required.) Clipboards <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	