alan (check) \$279.

Dorothy Milek Tax Service

8100 Shoal Creek, Suite 101 459-4157 FAX 459-0067 P.O. Box 9846 Austin, Texas 78766

TAXPAYERS COPY

Form 1040 Department of the Treasury -- Internal Revenue Service
U.S. Individual Income Tax Return

2	O	n	2
	v	v	

(99) IRS Use Only -- Do not write or staple in this space.

Use For the year Jan. 1-Dec. 31, 2002, or other tax year b	eginning ,:	2002, ending	, 20	OMB No. 15	45-0074
the			Your so	ocial security n	umber
IRS A label. B			463-	76-6490	
Other- E ALAN HAMILTON			Spouse	e's social secur	rity no.
wise,					•
print B 9902 CHILDRESS DR			AY	ou must enter	
or type. E AUSTIN TX 78753			_	our SSN(s) abov	ve.
Presidential Note. Checking "Yes" will not char	nge your tax or reduce your	refund.	Yo	u Spo	use
Election Campaign Do you, or your spouse if filing a jo	oint return, want \$3 to go to	this fund?	▶ Ye	s 🛛 No 🗍 Ye	s No
1 X Single	4	Head of household (with	h qualifying	person). (See i	inst.) If
Filing Status 2 Married filing jointly (even if onl	y one had income)	qualifying person is a ch	nild but not	your dependen	it, enter
Chack only. 3 Married filing separately. Enter	spouse's SSN above	child's name here. >			
Check only one box. and full name here.▶	5	Qualifying widow(er) with	th depende	nt child (year sp	oouse
		died ▶). (Se	ee instruction	ons.)	
6a X Yourself. If your parent (or s				No. of boxes	
Exemptions tax return, do not o	check box 6a			checked on 6a and 6b	1_
b Spouse				No. of children on 6c who:	
C Dependents: If more than five dependents, see inst.	(2) Dependent's	(3) Dependent's relationship to	(4) √ if qualifying child fo	— ● lived with you	
(1) First name Last name	social security numb	er you	fying child fo child tax cred (see inst.)	did not live	
				with you due to divorce or separation	
			Ш	(see inst.)	
			Щ	Dependents on 6c not	
				entered above	
				Add numbers on lines	
d Total number of exemptions claimed			50000000000	. above >	1
7 Wages, salaries, tips, etc. Attach Form(s)	W-2		_ 🖳		
Attach			7		156
Forms W-2 and 8a Taxable interest. Attach Schedule W-2G here.			. 8a		456
Also attach	_				
Form(s) 1099-R If tax was 9 Ordinary dividends. Attach Schedular Taxable refunds, credits, or offsets					
II tax vvas					
					005
12 Business income or (loss). Attach s 13 Capital gain or (loss). Attach Sche-			_	ر د	,995
if you did not		•	14		
get a W-2, See instructions. 14 Other gains or (losses). Attach For see instructions. 15a IRA distributions 15a	1.	Taxable amount (see inst.)			
16a Pensions and annuities . 16a		Taxable amount (see inst.)			
17 Rental real estate, royalties, partne		,			
Enclose, but do 18 Farm income or (loss). Attach Scho					
not attach, any payment. Also, 19 Unemployment compensation					
please use 20a Social security benefits . 20a	b	Taxable amount (see inst.) .			
Form 1040-V. 21 Other income.			21		
22 Add the amounts in the far right co	olumn for lines 7 through 21.	This is your total Income	22	4,	451
Adjusted 23 Educator expenses (see instruction	ns)	23			
Gross 24 IRA deduction (see instructions)		24			
Income 25 Student loan interest deduction (se	ee instructions)	25			
26 Tuition and fees deduction (see in	structions)	26			
27 Archer MSA deduction. Attach For	m 8853	27			
28 Moving expenses. Attach Form 39	_	28	_		
29 One-half of self-employment tax.	The state of the s	29 282	2		
30 Self-employed health insurance de	_	30	_		
31 Self-employed SEP, SIMPLE, and	· · · · –	31	_		
32 Penalty on early withdrawal of savi	_	32	_		
2 104012 33a Alimony paid b Recipient's SSN ▶		33a	_		
TWF 2756			_		202
Copyright Forms (Software Only) – 2002 TWNL 35 Add lines 23 through 33a Subtract line 34 from line 22. This is			34	1	282

JVA

Form 1040 (20	02)	HAMILTON 463-76-6490	Page 2
Tax and	36	Amount from line 35 (adjusted gross income)	36 4,169
Credits	37a	Check if: You were 65/older, Blind; Spouse was 65 or older, Blind.	
Standard		Add the number of boxes checked above and enter the total here ▶ 37a	
Deduction	b	If you are married filing separately and your spouse itemizes deductions, or you	
	_	were a dual-status alien, see instructions and check here ▶ 37b	
checked	³⁸	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	38 4,700
any box on	39	Subtract line 38 from line 36	39 -531
37b or who	40	If line 36 is \$103,000 or less, multiply \$3,000 by the total number of exemptions claimed on	
can be claimed as		line 6d. If line 36 is over \$103,000, see the worksheet in the instructions	40 3,000
dependent,	41	Taxable Income. Subtract line 40 from line 39. If line 40 is more than line 39, enter -0	41 0
	42	Tax (see inst.). Check if any tax is from: a Form(s) 8814 b Form 4972	42 0
Tax and 36			
\$4,700	44	Add lines 42 and 43	44
	45	Foreign tax credit. Attach Form 1116 if required	
	46	Credit for child & dependent care expenses. Attach Form 2441	
200	47		
filing	48		
Qualifying	49		
		(
filing			
\$3,925			
	54		54
	55		
Other			
2 104012			
TWF 1020		Household employment taxes. Attach Schedule H	60
	61	Add lines 55 through 60. This is your total tax	61 564
Payments	62		
	_63	2002 estimated tax payments & amt. applied from 2001 return . 63	
	64	Earned Income credit (EIC)	
child, attach			
Schedule EIC.	66	Additional child tax credit. Attach Form 8812	
	67	Amount paid with request for extension to file (see instructions) 67	
	68	Other payments from: a Form 2439 b Form 4136 C Form 8885	
	69	Add lines 62 through 68. These are your total payments	69 285
Refund	70	If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you overpald	70
Direct	71a	Amount of line 70 you want refunded to you	71a 0
	▶ b	Routing no.	
	► d	Account no.	
71c, and 71d.	72	Amt. of line 70 you want applied to your 2003 estimated tax ▶ 72	
	73	Amount you owe . Subtract line 69 from line 61. For details on how to pay, see instructions ▶	73 279
AND THE STATE OF T			
	Do yo		
			ion ▶ 10290
	theya	penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to th re true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prepa	ie best of my knowledge and belief, arer has any knowledge.
	Υ		Daytime phone number
See instruction	s	PAINTER	
Keep a copy for your	S	pouse's signature. If a joint return, both must sign. Date Spouse's occupation	
Daid		Cueck II	
	sign	V O SI 2005 sell-employed 2	
		of the field of th	1857284
USE UTILY			
	add	ress, & ZIP code AUSTIN TX 78757 512-45	9-4157

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side. ALAN HAMILTON

Your social security no. 463-76-6490

		Schedule B Interest and Ordinary Dividends		Attachn Sequer		08
Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶		Am	ount	
(See the instructions for Schedule B and Form 1040, line 8a.)		GUARANTY			4	56
Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter			1			
the total interest shown on that						
form.	2	Add the amounts on line 1	2		4	56
		Form 8815, line 14. You must attach Form 8815	3			
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ▶	4		4	56
		te. If line 4 is over \$1,500, you must complete Part III.				
Part II Ordinary Dividends (See the instructions for Schedule B, and	5	List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the instructions for Form 1040, line 13 ▶		Am	ount	
Note. If you received a Form 1099–DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	,		5			
Copyright Forms (Software Only)	6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9	6			0
- 2002 TWNL	No	te. If line 6 is over \$1,500, you must complete Part III.				
Part III	a fore	must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; OR eign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a forei	gn tru	st.	Yes	No
Foreign Accounts and Trusts		At any time during 2002, did you have an interest in or a signature or other authority over a fing in a foreign country, such as a bank account, securities account, or other financial account? So for exceptions and filing requirements for Form TD F 90-22.1	See in	structions		X
(See instructions.)	8 8	If "Yes," enter the name of the foreign country ▶ During 2002, did you receive a distribution from, or were you the grantor of, or transferor to, a If "Yes," you may have to file Form 3520. See instructions				X

1

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065 or Form 1065-B.

▶ See Instructions for Schedule C (Form 1040).

2002

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ▶ Attach to Form 1040 or Form 1041. Sequence No. 09 Social security number (SSN) Name of proprietor ALAN HAMILTON 463-76-6490 A Principal business or profession, including product or service (see the instructions) B Enter code from instructions PAINTER SERVICES 235500 C Business name. If no separate business name, leave blank. D Employer ID no. (EIN), if any ALAN L HAMILTON Business City, state, ZIP (1) X Cash (2) Accrual (3) Other (specify) ▶ Accounting method: G Did you "materially participate" in the operation of this business during 2002? If "No," see instructions for limit on losses **H** If you started or acquired this business during 2002, check here Part I Income 1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see instructions and check here ▶ 1 3,995 Returns and allowances. 2 3 3 3,995 4 5 3,995 5 Gross profit. Subtract line 4 from line 3 Other income, including Federal and state gasoline or fuel tax credit or refund (see instructions) 6 7 3,995 **Expenses.** Enter expenses for business use of your home only on line 30. 19 19 Pension & profit-sharing plans **8** Advertising...... Bad debts from sales or 20 Rent or lease (see instructions): 9 20a services (see instructions) a Vehicles, machinery, and equipment 10 Car and truck expenses 20b **b** Other business property 10 21 Repairs and maintenance (see instructions) 21 11 11 Commissions and fees. 22 Supplies (not included in Part III) . . . 22 12 23 Taxes and licenses 23 24 Travel, meals, & entertainment: 13 Depreciation and section 179 expense deduction (not included 24a 13 **b** Meals and in Part III) (see instructions)..... 14 Employee benefit programs entertainment 14 (other than on line 19) C Enter nondeductible 15 Insurance (other than health)... 15 amount included on line 24b (see instructions) . . . 16 Interest: 16a 24d d Subtract line 24c from line 24b a Mortgage (paid to banks, etc.) 16b 25 Utilities..... 17 Legal and professional 26 Wages (less employment credits). . . 26 17 27 Other expenses (from line 48 on 18 27 28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns ▶ 28 29 30 Expenses for business use of your home. Attach Form 8829 30 31 Net profit or (loss). Subtract line 30 from line 29. If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, 31 3,995 see instructions). Estates and trusts, enter on Form 1041, line 3. If a loss, you must go to line 32. 32 If you have a loss, check the box that describes your investment in this activity (see instructions). If you checked 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 32a All investment is at risk. 32b (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3. Some investment is not at risk. If you checked 32b, you must attach Form 6198.

SCHEDULE SE (Form 1040)

Self-Employment Tax

OMB No. 1545-0074

2002

Attachment Sequence No. 17

Department of the Treasury Internal Revenue Service (99)

▶ Attach to Form 1040. ▶ See Instructions for Schedule SE (Form 1040).

Name of person with **self-employment** income (as shown on Form 1040) ALAN HAMILTON

Social security number of person with self-employment income ▶ 463 - 76 - 6490

Who Must File Schedule SE

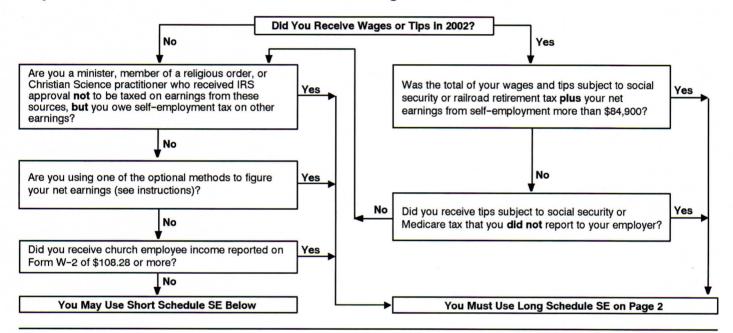
You must file Schedule SE if:

- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is
 not church employee income. See instructions.

Note. Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE. See instructions.

Exception. If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write "Exempt -- Form 4361" on Form 1040, line 56.

May I Use Short Schedule SE or Must I Use Long Schedule SE?



Section A -- Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065),		
	line 15a	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065),		4
	line 15a (other than farming); and Schedule K-1 (Form 1065-B), box 9. Ministers and members of		
	religious orders, see instructions for amounts to report on this line. See instructions for other income		
	to report	2	3,995
3	Combine lines 1 and 2	3	3,995
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do		
	not file this schedule; you do not owe self-employment tax ▶	4	3,689
5	Self-employment tax. If the amount on line 4 is:		
	• \$84,900 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040,		
	line 56.	5	564
	 More than \$84,900, multiply line 4 by 2.9% (.029). Then, add \$10,527.60 to the result. Enter 		
	the total here and on Form 1040, line 56.		
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5).		
	Enter the result here and on Form 1040, line 29 6 282		

GUARANTY BANK

P.O. BOX 1149 AUSTIN, TEXAS 78767 1-800-288-8822 INTEREST INCOME

PAYER EIN - 74-2511478

FORM 1099-INT, INTEREST INCOME FOR CALENDAR YEAR 2002 SEQ# 1 OMB NO. 1545-0112

Hardfoldelia blada balla della della

ALAN L HAMILTON 9902 CHILDRESS DR AUSTIN TX 78753-4332 RECIPIENT'S IDENTIFYING NUMBER: 463-76-6490

NOTE:

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

ACCOUNT TYPE	ACCOUNT NUMBER	BOX 1 INTEREST	BOX 2 PENALTY	BOX 3 INTEREST	BOX 4 FED TAX	
MARKET RATE	380-0446704	455.99	0.00	0.00	0.00	
BOX 1 - INTEREST BOX 2 - EARLY W BOX 3 - INTEREST BOX 4 - FEDERAL BOX 5 - INVESTME BOX 6 - FOREIGN		DIN BOX 3 DS AND TREASUR'		\$ \$ \$ \$ \$	455.99 0.00 0.00 0.00 0.00	
	COPY B OF FORM 10 PARTMENT OF TREASURY			ICE		

BOX 1 and BOX 2 totals include forfeited interest.

Orothy Milek
Tax Service
8100 Shoal Creek, Suite 101, P.O. Box 9846
Austin, Texas 78766

ALAN HAMILTON 9902 CHILDRESS DR AUSTIN, TX 78753

 $\label{thm:like-limit} It has a like-independent of the like-independent of$

18123+4335 03

CUSTOM	ER'S ORDER NO. DATE	25-02
NAME	Ham I'm	~ 0
ADDRESS		
ADDITES.	9862 Childress	BN
CITY, STA	TE, ZIP	
SOLD BY	CASH C.O.D. CHARGE ON ACCT.	MDSE PAID OUT
OUAN	res/spense	RETD.
QUAN.	DESCRIPTION	AMOUNT
1	Cleaned garage.	
2	packed loyer for	U
3	Salvetion - DO)	
4	made reveral	94
5	+: + 1	
6	lings to unload	
7	Salvate etc	- درول
8	survivo ere	
9	DI TO I	
-	Pot by check	
10	# 2109	
11		
12		
4714		
RECEIVED	DBY DE OF	

		IEN S	5 0	RDER	NO.			DATE // -		5.	-0	2
NA	AME											
ΑĽ	DDRES	s g	8	62	ch	il	d	rese	- 1	9	U	
	TY, STA	ATE,	ZIF	•								
SC	LD BY	CAS	SH	C.O.D.	CHAR	ŝΕ	ON	ACCT.	MD RE	SE TD.	PAI	D OUT
_	QUAN			D	ESCR	P.	TIO	N		Α	MO	UNT
1		1	Ce	lean	id	9	ar	age				
2					d							
3			80		tion			03)				
4			Th		e se			al				See.
5		- 2	tr	100 1	to i	iya.	lo	-d				
6				/	lev							
7		-	50	alva	tem	1	etc	,		3	25	'oe
8					7	1						2
9		,	K	It ,	ly	C	do	A				
10				i	# 1	-	0	9				
11	1				7						7	
12				/	/							
				1								
RE	CEIVE	O BY		and	Ho	*	*	A.				

CI	USTOME	R'S C	ORDER N	0.	DATE		
N	AME				2 - 1	18-0	12
	2	ta	milto	n			
A[DDRESS	9	902	child	ress		
Cl	TY, STATI	E, ZII	Р				
SC	DLD BY C	ASH	C.O.D. C	HARGE ON	ACCT. MD	SE PAIL	TUO C
(QUAN.		DE	SCRIPTIC	N	AMO	JNT
1		n		enance		30	
2	-						
3							_
4						-	
5							1
6							
7							
8							
9				1			
10		1		ing a	her		
11			# 2	129			
12							
250	CEIVED B	V		51	10		
TE(Olla	u	21	Hun	Charle		
)		EEP	THIS SI	IP FOR F	REFEREN	CE	(

ADDRESS	Ho	mil	· .	Torr	es		
CITY, STA	_		z cs	wire			
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSI	PAID	OUT
QUAN			ESCRIP			AMOL	
1	7	Namo	gerne	nt fee		50	<i>७७</i>
2	1	w W	rarch				
3	1		(
4				1		-	
5				1			
6	3		/				7
7							
8	1						
9				/			
10	+		/				3
11							
12	1						
12	No.						
RECEIV	- N	-	200	0	1		_

NAME		8-02
ADDRESS		
CITY, STAT		
SOLD BY C	ASH C.O.D. CHARGE ON ACCT. MD	SE PAID OUT
QUAN.	DESCRIPTION	AMOUNT
1	materine	
2	maintenaue-	40 00
3		
4		
5		
6		
7		
8		
9		
10		Z Z
11		
12	Paid in Cash	
RECEIVE	DBY W. O. J. J	2

ADDRESS								
CITY, STAT								
SOLD BY C	ASH	C.O.D.	CHARGE	ON ACCT.	MD: RET	SE D.	PAIC	OU
QUAN.		D	ESCRIP	TION	15.5	A	MO	JNT
1	W	ana	sem	ent				
2	1	w 1	for a	ent		3	70	00
3	1					The same		
4			/					No.
5		/						1
6	1	(1		
7)				
8			/					
9		_ /						
10	100	P	de	y				
11			cas	ih		L		
12			1			L		
		0		1				
RECEIVE	BY	1	1 -	111				

CUSTON	ED'S C	BOER N	NO.	DATE			-
CUSTON	ENSC	HDEN I		4-	10	-0	2
NAME				17			
ADDRES	S						
CITY, ST	ATE, ZI	P				34	
00100	JOACH	ICOD	CHARCE	ON ACCT.	MOSE	DAID	OUT
SOLD B1	CASH	C.O.D.	CHANGE	ON ACCI.	RETD	FAIL	001
QUAN	4.1	<u> </u>	ESCRIP'	TION	T	AMOL	JNT
1		ul v	vorte	at 2			
2	1	1.0.		at 2			
3	1	prac		Mante	. 19		
	- (Wan.	g +]	Manh	4	7.	
4			en			70	00
5							
6)	-			1
7		/		入			
8		(1				
9			\rightarrow	1	<i>y</i> = 1		
10		(7				
	-	5	>	4			
11		Pd	ly	infug.			
12			Cas	6			
				01			
RECEI	ED BY	11	Z	11/2		1	
	KE	EP THI	S SLIP F	OR REF	EREN	CE	7

ADDRESS		
CITY, STAT	E, ZIP	
SOLD BYIC	CASH C.O.D. CHARGE ON ACCT. ME	OSE PAID OUT
	HE	TD.
QUAN.	DESCRIPTION	AMOUNT
1	gd WA I place	20.00
2	11	
3		
4		-
5		
6		
7	1 / V	
8	1	0
9	Pd	
10	by	
11	Id Cash	
12	V	
REGEIVE	DBYAY/	

		•					4	0	11	26		
		STOM ME	EA	SC	PADER	NO.	DATE	1	v - (202	1	
		ADDRESS CITY, STATE, ZIP										
		LD BY		SH			ON ACCT.	MDE	D. PAI			
	-	an.		2		- La con-	HON Dri		AMO	UNT		
	2			0		2-1			20	00		
	3			8	A	app		1	10	00		
	4	2	2	-	VC-10		rooden	3			100	
	5	6	1		SERVICE TO		w Boo	~		00		
	7	3		SEVEN.		tene	The same of the sa		30	-		
	8			7	d	work			135		ŀ	
	9					7			133			
	10					5					200	
	n					1					2 1 2 2 1	
	12		100			2					The latest	
V. S. S. P. S.	RE	M		Po Y	l by	ch#	2149	4			VI 10 12 10 10 10 10 10 10 10 10 10 10 10 10 10	
1			K	EEI 706	THIS	SLIP F	OR REFE	REN	CE	11	_	

CUSTOME	R'S ORDER NO. DATE	12
NAME	17-	8-02
ADDRESS		
CITY, STAT	FE, ZIP	
SOLD RYK	CASH C.O.D. CHARGE ON ACCT. ME	OSE PAID O
	RE	TO.
QUAN.	DESCRIPTION	AMOUN
1	Management	
2	fee 9862 may	500
3		
4)	
5	A STATE OF THE STA	
6		
7	5	
8		
9		
10		
11	PIR	
12	Pd by Chick 2148	
	(wen 2140	

NAME_M	Hamilton	
ADDRESS		
CITY, STAT	E, ZIP	
ooi p pylo	ASH C.O.D. CHARGE ON ACCT. MD	DAID OUT
SOLD BY C	RET	D. PAID OUT
QUAN.	DESCRIPTION	AMOUNT
1	Trip to Dr on Research	20 00
2	air tires	10 00
3	Edged front . mound	
4	Front + Back	35 00
5	Stained ducide Back	
6		50 00
7	he -4	5000
8	Monagement Fee	55 00
9	Maintenance	
	0.1	220 00
10	Pd by Check	1
11	# 2175	
12	the A	
RECEIVED	IRV LOI	
HECEIVED	Mark Shawill	U

ADDR	ESS							
CITY,	STATI	E, ZII	P			1000		
	nulo.	1011	000	OUADOE	ON ACCT.	LADCE	Loan	0117
SOLD	BYIC	AOH	C.O.D.	CHANGE	ON ACCT.	RETD.	PAIL	,001
QU	AN.		D	ESCRIP	TION		AMOL	JNT
1		Pa	int	ing t	Carl	king		
2		2	1 1 4	wal	e-ker	Vocal	1000	2-01
3	m			ance			25	100
4	7-	Ť.			no lan	Forts	10	0
5	11		1 19	9/:	mabry you to	26	20	10
6			C	A OX	Joy A	4	1 4	an
	11	1,	Cyc	1-10	UTDE		085	00
7			- 0	otal		/	080	.00
8				č a				
9		1	#	102	2			
10					2			
11			<					
12				/				ζ
	1.8		1					

CU	STOMER	'S ORDER NO. DATE	29.	. 0	2	
NA	ME M. J.	familton 8.				
	DRESS	1902 Childres	s			
		ustin Ty				
SO	LD BY C	ASH C.O.D. CHARGE ON ACC	RET		PAIC	OUT
(QUAN.	DESCRIPTION		Al	MOL	JNT
1	\$-5-0	thip to + from der	de la companya della companya della companya de la companya della	2	Ó	00
2	8-1-04	management for		حک	4	30
3		Farret repair (Kit	There		l's	00
4		Mantence 9902		_	0	00
5	-	9008	€,0,	, 3	0	00
6		Total		13	30	70
7		Total	-	1-	25	01
8	4	Pd o check				
9	*	# 1205				
10						
11		-/2				
12		7				
RE	CEIVED	lan K. Henry	M	5		
	1	KEEP THIS SLIP FOR REFI	ERE	NCE	. **	1

CU	STOMEF	S'S ORDER NO. DATE	1-7-	27
NA	ME	1,,,,,	/	12
AD	DRESS			
CIT	Y, STATE	= 7IP		
	-			
SO	LD BY C	ASH C.O.D. CHARGE ON ACCT. MD	D. PAID	OUT
0	QUAN.	DESCRIPTION	AMOL	JNT
1	7/1	Management fee	50	00
2	1/8	maintenance	20	00
3	7/11	**	35	50
4	7/20	-11	50	00
5		gas	14	00
6		took Flat to lear may.	10	00
7		tire repair	10	80
8	1	que	15	60
9	K		204	50
10		Put tire Back on for	10	00
11			219	60
12		Pd & Check #		
	-	288		
RE	CEIVED	BY Hand ton		
		KEEP THIS SLIP FOR REFEREN	ICE	(

CUSTOME	R'S ORDER NO. DATE	02 19/27-0
NAME		
ADDRESS		
CITY, STAT	E, ZIP	
SOLD BY C	ASH C.O.D. CHARGE ON ACCT. ME	SE PAID OUT
	HE	ID.
QUAN.	DESCRIPTION	AMOUNT
1	mangement fie 9862	50 00
2	grant 9902 main	5000
3	Repair mell boy	
4	Port etce 9008	175 00
5	maintene 9902	40 00
6	11 490088	30 00
7	Total	345 00
8	Pd	102
9	č	
10	check	
11	# 22/8	
12	7	
	11	
RECEIVED	a Lateral	4
1	KEEP THIS SLIP FOR REFERE	NCE

NAN	DRESS				9.3	0 - 0	2	
ADI	JHES							
CIT	Y, STA	TE, Z	IP .					
SOL	D BY	CASI	1 C.O.D.	CHARGE	ON ACCT.	MDS	E PAID	OUT
0	UAN	T	D	ESCRIP	TION		AMO	JNT
1	9/1/	27			T fee		58	00
2	9/16		naint	man	re 90		30	ಕಲ
3	9/1	9	7.1		990	2	30	40
4				70	tal	#	10	n
5	,							
6		1		Al	The same of the sa		7-0-1	327
7			i	-	lotal		100	0
8			de	de :	#			
9			2	211				
10		1	-	7				
11				/				
12			_) [
			,		2004	2		
HE	CEIV	10	who	X	nets	50	4	

CU	STOM	ER'S C	RDER	NO.	DATE /2	,	,	. 7	*
NA	ME				12				
AD	DRESS	3							
CI	TY, STA	TE, ZI	P						
SO	LD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MD	SE	PAII	OOUT
						HE			
(QUAN.		D	ESCRIP	TION		A	MO	UNT
1		7	nair	lenen	re 98	62	1	00	<i>0</i> 0
2			"		9008		1	25	∞
3			"	+ food	9902		1	00	00
4		6	rre	nr t	food		2	5	so
5				-	tal		3	50	10
6			`	1					
7				1					
8			/				8 10		
9			-	_	*				
10)		100		
11	7		Pd	2 # 2					
12			ches	£ # x	-243				
				3	1	_	/		
RE	CEIVE	BY	Un	E H	and	my			
	1	KEE	P THIS	SLIP FO	OR REFE	REN	ICE		11

	12-	1-	02	
ADDRESS				
CITY, STA	TE, ZIP			
SOLD BY	CASH C.O.D. CHARGE ON ACC	T. MDS RET	D. PAII	OOL
QUAN.	DESCRIPTION		AMO	UNT
1	Manage ment for	e	50	US
2	Maintence 9008		75	00
3	" 9902		50	00
4	TO HEB to Pick u	,		
5	aned I lounds + fo		75	60
6	maintence 986:	2	50	00
7	Sul- Total		300	00
8	More Maintence		25	0%
9	Tatal		325	150
10	Pd & Check	×		
11	# 2233			
12	77			
	2 m	1		
RECEIVE	D BY	1		

CUSTOME	R'S ORDER NO. DATE	-01
NAME	Pd in (
ADDRESS	9862	
CITY, STAT		
SOLD BY C	ASH C.O.D. CHARGE ON ACCT. MD	SE PAID OUT
QUAN.	DESCRIPTION	AMOUNT
1	Laur work	
2	tringmed limbs	
3	from trees of	7 (***) 2
4	home	Let the second
5	V Z TO	land
6	Riched my cailing to delivered to	5
7	9862	125 60
8		S. T
9		
10	5	
11	1/7	
12	he chick#	
	2114	
RECEIVE	and Themillog	

ADDRESS .	Pd in 20	02	>	
9	1862 Children			
CITY, STATI	E, ZIP		1	
SOLD BY C		SE TD.	PAID	OU
QUAN.	DESCRIPTION	A	MOU	NT
1	moved left over			
2	furniture out of			
3	house			
4	ted Fire ants			
5	mowed redged			
6	loven!		95	0
7	1	1		,
8	The second of the second			
9	2 /			
10				
11				
12	check/#2114			
		The same of		
RECEIVE	and Hamilton			

1			
CUSTON	MER'S ORDER NO.	DATE 12 -	61
NAME		Pd in C	
ADDRES	9902	in the	
CITY, ST	ATE, ZIP		
SOLD BY	CASH C.O.D. CHARGE ON		PAID O
	1	RETD.	
QUAN	1-		AMOUN
2	transfered		
3	from garage		
4	Car + unla	May 10 To 10	
5	transfered,		
6	boyes of art	3	
7	to garage so	ALL STREET	Z I
	Zota	l 1	00 0
8	+ 17	\-	
9		1,	
10	4	1/A/ 3	*
11	1	1. 12	
12	1 /fd	in lack	/

	MAURINE P. HAMILTON 11-83 9902 CHILDRESS 80/Z0/I0 31 AUSTIN, TEXAS 78753 WHUNDHIIM 08/N0 65:12:01 80/Z0/I0 I66Z 950Z 808Z 80Z	D	88-7066 3149 0038054700 ATE /1-	28-82	2243
DELUXE WALLET OR DUPLICATE	Three hundred fifty of 100	Guaranty 50		\$35	
0	Guaranty AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Work. 1:3149706641: 003805470			P. Hanil	MP 0 3 5000 i"

MAURINE P. HAMILTON 11-83 9902 CHILDRESS AUSTIN, TEXAS 78753	58290 107 3149 0038054700 DATE /2-0	2232
PAY TO THE alan & Hamilton Three hundred wenty fire 3 1	Guaranty 50	DOLLARS 1 Society Features Potentials on Back
AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Work 1:3149706641: 003805470	maurine P.	Hamilton M.

MAURINE P. HAMILTON 11-83 70/91/01 3180 SS3NISDJ 0038054700 9902 CHILDRESS THMHJUHIIN 05/NJ 00*011* AUSTIN, TEXAS 78753 AUSTIN	2211
5 / A / Mo _	ARS To Security Features included.
Guaranty 50	
Guaranty AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Work from 911602-9/30/02 Maurine P. Hom 1:3149706641: 003805470011 2211 110000	ilter MP

MAURINE P. HAMILTON 11-83	TXPL 05 exp. 88-7066 3149	35 8790 2218
9902 CHILDRESS 78753 78753 78787 787	203805470	
PAY TO THE alan L Hamilton	38024200	\$ 345.00
Three hundred forty fine of To	Guaranty 50	DOLLARS
Guaranty BANK AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Works	mourine	P. Hamilton M
1:3149706641: 0038054700		"'00000 3 4 5 00"

MAURINE P. HAMILTON 11-83 05358 8-7066 201 2175
9902 CHILDRESS 0038054700
HOSINESS DULE 05/01/05 CHYSO WITHDROWNER CHYSO WI
38024/00 203 20306 2048 8400 07/01/02 13:37:10
PAY to the alaw J. Hamilton \$ 220.00
Jwo hundred Twenty 3d 100 DOLLARS 1 Security Features produced. Departs of Back.
Guaranty 50
Guaranty AUSTIN BANKING CENTER 24-hour Customer Service 1.800,288.8822
MEMO WORK Maurine P. Hamilton MP
:314970664: 0038054700" 2175 "0000022000"
CLASSIC POOR D. CLASSIC POOR D
CLASSIC POOR DISNET

MAURINE P. HAMILTO 9902 CHILDRESS AUSTIN, TEXAS 78753 TZ:70:TT 70/77/70	NSIKESS DULE 05/15/05	SDATE 2 - 8- 02	2114
Three hundred			320.00 LLARS (1) Security Features included.
Guaranty AUSTIN BANK	Guaranty ING CENTER mer Service-1:860:288 8822		
MEMO Jabov in 200 a Pd in		114 1'000	Ston MP 0003 20001

MAURINE P. HAMILTON 11-83		88-7066 3149		2205
		TIDATE 9-	13-02	
One hundred fifty fine?			\$ 55.	
Pot 1	Guarant	y 50		
Guaranty AUSTIN BANKING CENTER 24-hour Customer Service 1.800.28		wine P.	Homil	to n
:314970664: 0038054	4700# 2	205	,'00000	15500

	2	-	
MAURINE P. HAMILTON		88-7066 3149 201	2188
	BR21HE22 DULE 00/13/05 2*512*00 CK/20 MILHDKUMUF 38024/00 503 50302 5022 2243	0038054700 DATE 7 -	27-02
	Hamilton		\$ 215.00
Luo hundred	fifteen me no		DOLLARS Security Features included. Details on Back
10 3	Guaranty 50		
Guaranty AUSTIN BANKI 24-hour Custon MEMO Work	mer Service 1 800 288 8822	ine P.	Hamilton N
1:3149706641: (0038054700# 214	3.8	"00000 2 1 500

MAURINE P. HAMILTON 11-83 9902 CHILDRESS Z0/0T/S0 310 AUSTIN, TEXAS 78753 THEHMOULTE AD INC.	88-7066 3149 0038054700	2149
CK/SA MILHDRUMUN 5787 SAXST NITSUA 503 50303 5028 3215 02/10/05 15:10:34	00°551*DATE 5-10-02 000000000000000000000000000000000	
PAY TO THE Dlan S. Hemilton	\$/35	. 00
One hundred thirty fine 34	DOLLAR Guaranty 50	Security Features Included. Details on Back.
Guaranty BANK AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Work	maurine P. Hamis	eton ,
1:3149706641: 0038054700		13500

MAURINE P. HAMILTON 111- 9902 CHILDRESS AUSTIN, TEXAS 78753	EB DULE OZYTOVOZ CK/SV WITHI	eeau ceea	88-7066 3149 0038054700 TE 5 -	8-02	2148
PAY TO THE alan J. Ham.	0 503 50303 5026	3802450		\$ 50,	74-14
Guaranty AUSTIN BANKING CE	NTER	Guaranty 50		DOLLARS	Details on Back.
BANK 24-hour Customer Ser MEMO 9862 Manage must				9 Janil	

88-7066 3149 0038054700 0°05\$ DATE 3-14-02	2131
Maurin P. Hamill	ton MP
	#ISAM 0038054700 #ISAM 0038054700 \$ 003 DATE 3 - 14 - 02 \$ 508E DOLLAR. ranty 50

MAURINE P. HAMILTON 11-83 9902 CHILDRESS 74 147 164 7 103	88-7066 3149 0038054		2129
CV/OL/2N ALIHDRUMUL CK/SV WILLIAM CK/SV VICTOR CK/SV WILLIAM CK/SV VICTOR CK/SV VIC	00"0E\$ DATE 2	-28-02	
PAY TO THE alan J. Hamilton	38024200	\$30.	OF
Thirty's no	Guaranty 50	DOLLARS	Security Features Included. Details on Back.
Guaranty BANK AUSTIN BANKING CENTER 24-hour Customer Service 1.800.288.8822 MEMO Mainlenance	Maurin	e P. Hamil	ton N
1:3149706641: 0038054700	2129	,'00000i	000£C

MAURINE P. HAMILTON 11-83 9902 CHILDRESS AUTIN, TEXAS 78753 Z0/50/Z0 3100 SS3NISNI TWANDAMARKA	88-7066 ₂₀₁ 7 2109 0038054700 DATE (- 26-01)
PAY TO THE Olan Hamilton 0024508E ORDER OF Olan Hamilton Guarante five 32 Guara	DOLLARS To Security Features related to the control of the control
	2109 100000325001

Guaranty

Customer Receipt

CHECK HOLD: ☐ 2 Business Days \$ __

☐ 5 Business Days \$ ___

38054700 \$700.00

CK/SV DEPOSIT 203 20303 2056 8852

08/09/02 09:42:01 \$4,434.08 BUSINESS DATE 08/09/02

700

Thank You for Banking with Us!

GFS-4809 (Rev. 2/01)

108.57

MEROES 2001

alan (check) \$279.

Dorothy Milek Tax Service