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January 14, 2010

Via Hand Delivery

The Honorable Anna Russell
City Secretary
City of Houston
901 Bagby, Public Level
Houston, TX 77002

Re: Antoinette "Toni" Lawrence Campaign Finance Report

Dear Ms. Russell:

Enclosed, please find a copy of Antoinette "Toni" Lawrence's January 15, 2010 campaign finance report.

In September 2009, Ms. Lawrence filed papers with Harris County establishing herself as a potential candidate for Harris County Commissioner, and setting up a specific purpose political committee for the exploratory process. In accordance with Texas Election Code Sec. 252.010, her treasurer appointment with the City of Houston transferred to Harris County at that time, ending her obligation to file any further campaign finance reports with the City of Houston.

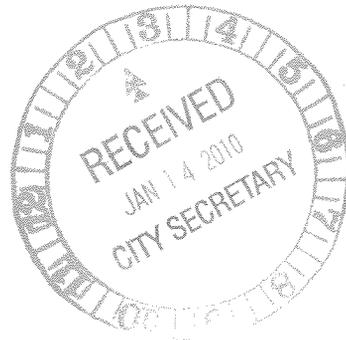
However, in the interest of full disclosure, Ms. Lawrence wishes to file a copy of her campaign finance report with the City of Houston. Enclosed is a copy of that report for your records.

Should you have any questions in this matter, please do not hesitate to contact me.

Sincerely,

Gardner Pate

Enclosure



CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Lawrence, Antoinette (Mrs.)

15 ACCOUNT # (Ethics Commission filers)
00000002

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
Friends of Toni Lawrence Exploratory Committee

GENERAL

COMMITTEE ADDRESS
PO Box 9258292
Houston, TX 77292

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME
Miller, Robert D.

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS
600 Travis Street, Suite 3400
Houston, TX 77002

17 CONTRIBUTION TOTALS

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

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	338.27
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4. TOTAL POLITICAL EXPENDITURES	\$	107,506.39
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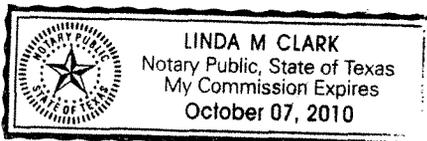
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	174,413.85
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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.

Antoinette Lawrence
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ANTOINETTE LAWRENCE, this the 13th day of January, 2010, to certify which, witness my hand and seal of office.

Linda M. Clark
Signature of officer administering oath

LINDA M. CLARK
Print name of officer administering oath

NOTARY
Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/6 Report: 3/13

2 FILER NAME Lawrence, Antoinette (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000002

4 Date	5 Payee name Alice O'Neill Campaign	7 Amount (\$)
07/21/2009	6 Payee address; City; State; Zip Code 448 W. 19th, Box 345 Houston, TX 77008	\$100.00

8 Purpose of payment (See instructions regarding type of information required.)
Political Contribution

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date	Payee name Combined Municipal Campaign	Amount (\$)
11/05/2009	Payee address; City; State; Zip Code 611 Walker, Fl 4 Houston, TX 77002	\$80.00

Purpose of payment (See instructions regarding type of information required.)
Contribution

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date	Payee name Crime Stoppers	Amount (\$)
08/17/2009	Payee address; City; State; Zip Code PO Box 541654 Houston, TX 77254	\$1,000.00

Purpose of payment (See instructions regarding type of information required.)
Contribution

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date	Payee name Crime Stoppers	Amount (\$)
08/20/2009	Payee address; City; State; Zip Code PO Box 541654 Houston, TX 77254	\$60.00

Purpose of payment (See instructions regarding type of information required.)
Lunch

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/6 Report: 4/13

2 FILER NAME Lawrence, Antoinette (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000002

4 Date

12/15/2009

5 Payee name
Crime Stoppers

6 Payee address; City; State; Zip Code
PO Box 541654
Houston, TX 77254

7 Amount (\$)

\$25.00

8 Purpose of payment (See instructions regarding type of information required.)
Lunch

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

09/03/2009

Payee name
Cy Fair Chamber of Commerce

Payee address; City; State; Zip Code
11734 Barker Cypress Rd
Cypress, TX 77433

Amount (\$)

\$60.00

Purpose of payment (See instructions regarding type of information required.)
Campaign Lunch/Forum

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

11/12/2009

Payee name
Disc Pro Graphics

Payee address; City; State; Zip Code
PO Box 1581
Houston, TX 77251

Amount (\$)

\$278.00

Purpose of payment (See instructions regarding type of information required.)
In-Kind Printing for Alice O'Neill Campaign

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

10/05/2009

Payee name
El Rey Restaurant

Payee address; City; State; Zip Code
910 Shepherd
Houston, TX 77002

Amount (\$)

\$112.36

Purpose of payment (See instructions regarding type of information required.)
Officeholder Breakfast

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 5/13
2 FILER NAME Lawrence, Antoinette (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000002
4 Date 09/11/2009	5 Payee name Friends of Toni Lawrence Exploratory Committee 6 Payee address; City; State; Zip Code PO Box 925292 Houston, TX 77292	7 Amount (\$) \$100,000.00
8 Purpose of payment (See instructions regarding type of information required.) Contribution (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 08/03/2009	Payee name Greater Houston Pachyderm Club Payee address; City; State; Zip Code PO Box 22531 Houston, TX 77227	Amount (\$) \$45.00
Purpose of payment (See instructions regarding type of information required.) Membership Dues (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 08/04/2009	Payee name Greater Houston Pachyderm Club Payee address; City; State; Zip Code PO Box 22531 Houston, TX 77227	Amount (\$) \$25.00
Purpose of payment (See instructions regarding type of information required.) Campaign Lunch (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 09/29/2009	Payee name Houston Employee Relief Organization (HERO) Payee address; City; State; Zip Code 611 Walker, FI 12 Houston, TX 77002	Amount (\$) \$175.00
Purpose of payment (See instructions regarding type of information required.) Donation (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: 4/6 Report: 6/13
2 FILER NAME Lawrence, Antoinette (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000002
4 Date 09/14/2009	5 Payee name Houston Professional Firefighters Association 6 Payee address; City; State; Zip Code 1907 Freeman St Houston, TX 77009	7 Amount (\$) \$95.00
8 Purpose of payment (See instructions regarding type of information required.) Contribution (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 09/05/2009	Payee name Kingwood Area Republican Women Payee address; City; State; Zip Code PO Box 5906 Houston, TX 77325	Amount (\$) \$75.00
Purpose of payment (See instructions regarding type of information required.) Campaign Dinner (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 09/05/2009	Payee name Kingwood Area Republican Women Payee address; City; State; Zip Code PO Box 5906 Houston, TX 77325	Amount (\$) \$15.00
Purpose of payment (See instructions regarding type of information required.) Membership Dues (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 09/16/2009	Payee name Kingwood Area Republican Women Payee address; City; State; Zip Code PO Box 5906 Houston, TX 77325	Amount (\$) \$17.00
Purpose of payment (See instructions regarding type of information required.) Campaign Lunch (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: 5/6 Report: 7/13
2 FILER NAME Lawrence, Antoinette (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000002
4 Date 10/01/2009	5 Payee name Owens, Philip 6 Payee address; City; State; Zip Code 10231 Glenfield Park Ln Houston, TX 77070	7 Amount (\$) \$1,800.00
8 Purpose of payment (See instructions regarding type of information required.) Officeholder Staff Salary (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 09/28/2009	Payee name Scenic Houston Payee address; City; State; Zip Code 3015 Richmond #220 Houston, TX 77098	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Campaign Dinner (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 08/15/2009	Payee name Shack, Ed Payee address; City; State; Zip Code 814 San Jacinto Blvd Austin, TX 78701	Amount (\$) \$800.00
Purpose of payment (See instructions regarding type of information required.) Legal Fees (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 09/29/2009	Payee name SW Silkscreen & Embroidery Payee address; City; State; Zip Code 7351 Ashcroft Houston, TX 77081	Amount (\$) \$697.98
Purpose of payment (See instructions regarding type of information required.) T-Shirts as In-Kind Donation to 100 Club Golf Tournament (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: 6/6 Report: 8/13

2 FILER NAME Lawrence, Antoinette (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000002

4 Date

08/11/2009

5 Payee name
Texas Tea Party Republican Women

7 Amount
(\$)

\$15.00

6 Payee address; City; State; Zip Code
15710 Windy Glen
Houston, TX 77095

8 Purpose of payment (See instructions regarding type of information required.)
Campaign Dinner

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

09/08/2009

Payee name
Texas Tea Party Republican Women

Amount
(\$)

\$30.00

Payee address; City; State; Zip Code
15710 Windy Glen
Houston, TX 77095

Purpose of payment (See instructions regarding type of information required.)
Membership Dues

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/4 Report: 9/13
2 FILER NAME Lawrence, Antoinette (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000002
4 Date	5 Payee name Carter & Cooley	8 Amount (\$)
10/27/2009	6 Payee address; City; State; Zip Code 375 W 19th Houston, TX 77008	\$18.35
	7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Christian Business Luncheon	Amount (\$)
07/14/2009	Payee address; City; State; Zip Code 3055 Tomball Parkway Tomball, TX 77375	\$15.00
	Purpose of expenditure (See instructions regarding type of information required.) Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Crescent Real Estate Equities, LP	Amount (\$)
08/04/2009	Payee address; City; State; Zip Code 2 Greenway Plaza, Ste 675 Houston, TX 77046	\$4.00
	Purpose of expenditure (See instructions regarding type of information required.) Parking for Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Dacapos	Amount (\$)
07/31/2009	Payee address; City; State; Zip Code 1141 E 11th St Houston, TX 77009	\$10.28
	Purpose of expenditure (See instructions regarding type of information required.) Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Gianna Italian Kitchen	Amount (\$)
09/03/2009	Payee address; City; State; Zip Code 28301 Tomball Parkway #100 Tomball, TX 77375	\$18.40
	Purpose of expenditure (See instructions regarding type of information required.) Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 10/13
2 FILER NAME Lawrence, Antoinette (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000002
4 Date 09/19/2009	5 Payee name Glad Tidings Assembly of God 6 Payee address; City; State; Zip Code 6803 Grovecrest Houston, TX 77092 7 Purpose of expenditure (See instructions regarding type of information required.) Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$) \$10.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 07/29/2009	Payee name Houston Chronicle Payee address; City; State; Zip Code PO Box 4260 Houston, TX 77002 Purpose of expenditure (See instructions regarding type of information required.) Subscription (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$66.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 09/30/2009	Payee name Houston Livestock Show & Rodeo Payee address; City; State; Zip Code 8334 Fannin St Houston, TX 77054 Purpose of expenditure (See instructions regarding type of information required.) Membership Dues (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$800.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/28/2009	Payee name Jeffrey Stone, Ltd Payee address; City; State; Zip Code 5000 Westheimer Rd Ste 610 Houston, TX 77056 Purpose of expenditure (See instructions regarding type of information required.) Campaign and Officeholder Office Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$5.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/07/2009	Payee name La Mexicana Payee address; City; State; Zip Code 1018 Fairview Houston, TX 77006 Purpose of expenditure (See instructions regarding type of information required.) Officeholder Staff Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$54.39 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

1 PAGE #

Schedule: 3/4 Report: 11/13

2 FILER NAME Lawrence, Antoinette (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

00000002

4 Date	5 Payee name	8 Amount (\$)
10/19/2009	Le Peep Restaurant ----- 6 Payee address; City; State; Zip Code 4702 Westheimer Houston, TX 77027 7 Purpose of expenditure (See instructions regarding type of information required.) Officeholder Breakfast Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$22.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
09/01/2009	Los Cucos ----- 6 Payee address; City; State; Zip Code 5535 Memorial Dr Ste G Houston, TX 77007 Purpose of expenditure (See instructions regarding type of information required.) Campaign Lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$11.72 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
09/08/2009	Office Depot ----- 6 Payee address; City; State; Zip Code 5330 W 34th St Houston, TX 77092 Purpose of expenditure (See instructions regarding type of information required.) Officeholder Office Equipment (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$97.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
12/26/2009	Office Depot ----- 6 Payee address; City; State; Zip Code 5330 W 34th St Houston, TX 77092 Purpose of expenditure (See instructions regarding type of information required.) Campaign and Officeholder Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$18.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
09/18/2009	Parking Management Services, Inc. ----- 6 Payee address; City; State; Zip Code 2222 W Loop S Houston, TX 77027 Purpose of expenditure (See instructions regarding type of information required.) Parking for Campaign Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$8.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

1 PAGE #

Schedule: 4/4 Report: 12/13

2 FILER NAME Lawrence, Antoinette (Mrs.)

3 ACCOUNT #

(Ethics Commission filers)

00000002

4 Date 07/14/2009	5 Payee name Texas Tea Party Republican Women	8 Amount (\$) \$15.00
	6 Payee address; City; State; Zip Code 15710 Windy Glen Houston, TX 77095	
	7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Dinner (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 11/29/2009	Payee name Verizon	Amount (\$) \$213.48
	Payee address; City; State; Zip Code 140 West Street New York, NY 10007	
	Purpose of expenditure (See instructions regarding type of information required.) Campaign Phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 12/26/2009	Payee name Verizon	Amount (\$) \$24.34
	Payee address; City; State; Zip Code 140 West Street New York, NY 10007	
	Purpose of expenditure (See instructions regarding type of information required.) Campaign Phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 13/13**2** FILER NAME Lawrence, Antoinette (Mrs.)**3** ACCOUNT # (Ethics Commission filers)
00000002**4** Date**5** Payor name

Friends of Toni Lawrence Exploratory Committee

8 Amount
(\$)

12/29/2009

6 Payor address; City; State; Zip Code
PO Box 925292
Houston, TX 77292

\$80,748.39

7 Reason for credit
Refund of Contribution