

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)

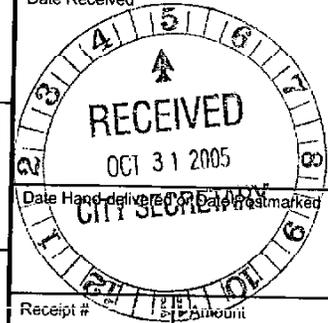
2 PAGE #
1 of 22

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr. HIPOLITO M.
NICKNAME LAST SUFFIX
POLI ACOSTA

OFFICE USE ONLY

Date Received



Date Hand delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2918 BAGBY ST.
HOUSTON, TX 77006

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Richard
NICKNAME LAST SUFFIX
Rick Sindelar III

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
6114 Queensloch Dr.
Houston, TX 77050

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 229-8733

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
10/01/2005 10/28/2005

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff General Special
11/08/2005

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)
City Council at Large Pos. 2

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

... 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

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME ACOSTA, HIPOLITO M. (Mr.)

16 ACCOUNT # (Ethics Commission filers)

17 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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

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

\$ 445.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 48,066.04

EXPENDITURE TOTALS

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

\$ 37.00

4. TOTAL POLITICAL EXPENDITURES

\$ 41,874.56

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 41,004.98

OUTSTANDING LOAN TOTALS

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

\$ 0.00

19 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.

Hipolito M. Acosta
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Hipolito Acosta, this the 31st day of October, 2005, to certify which, witness my hand and seal of office.

Troy D. Lemon
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: 1/14 Report: 3/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission file#)

4 Date 10/03/2005

5 Full name of contributor out-of-state PAC(ID# _____)
ACOSTA, IRMA

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/03/2005

6 Contributor address; City; State; Zip Code
HOUSTON, TX 77039-3742

\$200.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
ACOSTA, JESSICA

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/17/2005

Contributor address; City; State; Zip Code
LA UNION, NM 88021

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
ACOSTA, MARIA DEL ROSARIO

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/17/2005

Contributor address; City; State; Zip Code
EL PASO, TX 79914

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
BOYLE, THOMAS C.

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/25/2005

Contributor address; City; State; Zip Code
HOUSTON, TX 77019

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
CALDERON, MARCOS

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/27/2005

Contributor address; City; State; Zip Code
HOUSTON, TX 77005

\$1,000.00

Principal occupation / Job title (See Instructions)
BUSINESSMAN

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/14 Report: 4/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date 5 Full name of contributor out-of-state PAC(ID# _____)
10/03/2005 CALLEJA, ANGELICA

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

HOUSTON, TX 77090

\$200.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/12/2005 CAMARENA, JOSE (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

HOUSTON, TX 77024

\$5,000.00

Principal occupation / Job title (See Instructions)
ARANDAS FRANCHISES, INC.

Employer (See Instructions)
CEO

Date Full name of contributor out-of-state PAC(ID# _____)
10/27/2005 CASTILLO, MAX

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

HOUSTON, TX 77055

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/02/2005 CHELALA, RICARDO

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

HOUSTON, TX 77077

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/08/2005 CLAROS, JUAN A.

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

HOUSTON, TX 77036

\$100.00

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: 3/14 Report: 5/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date 5 Full name of contributor out-of-state PAC(ID# _____)
10/25/2005 COLON, EDGARDO E.

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/25/2005

6 Contributor address; City; State; Zip Code

HOUSTON, TX 77098

\$100.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/19/2005 COOPER, CHARLES E.

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/19/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77057-1119

\$250.00

Principal occupation / Job title (See Instructions)
BUSINESSMAN

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/04/2005 CORRAL, ALICE

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/04/2005

Contributor address; City; State; Zip Code

HUMBLE, TX 77346

\$1,500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/03/2005 CORRAL, MANUEL

Amount of contribution (\$)

In-kind contribution description (if applicable)
FUNDRAISING EVENT

10/03/2005

Contributor address; City; State; Zip Code

HUMBLE, TX 77346

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/20/2005 CRUZ, DELY

Amount of contribution (\$)

In-kind contribution description (if applicable)
ADVERTISEMENT

10/20/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77076

\$250.00

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: 4/14 Report: 6/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date 10/03/2005 5 Full name of contributor out-of-state PAC(ID# _____)
CUESTA, ELIZABETH

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/03/2005

6 Contributor address; City; State; Zip Code

KATY, TX 77449-4722

\$100.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 10/03/2005 Full name of contributor out-of-state PAC(ID# _____)
CUESTA, ELIZABETH

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/03/2005

Contributor address; City; State; Zip Code

KATY, TX 77449-4722

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 10/24/2005 Full name of contributor out-of-state PAC(ID# _____)
DE LA GARZA, ERICK

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/24/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77080

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 10/19/2005 Full name of contributor out-of-state PAC(ID# _____)
DICKINSON, GEORGE

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/19/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77006

\$100.00

Principal occupation / Job title (See Instructions)
FINANCE

Employer (See Instructions)

Date 10/25/2005 Full name of contributor out-of-state PAC(ID# _____)
DINH, VU

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/25/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77072

\$250.00

Principal occupation / Job title (See Instructions)
BUSINESSMAN

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/14 Report: 7/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor out-of-state PAC(ID# _____)
ESPINOZA, SATURNINO

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

10/08/2005

6 Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77081

\$500.00

9 Principal occupation / Job title (See Instructions)
CONTRACTOR

10 Employer (See Instructions)
SELF EMPLOYED

Date

Full name of contributor out-of-state PAC(ID# _____)
FOSTER, CHARLES C.

Amount of
contribution (\$)

In-kind contribution
description (if applicable)
FUNDRAISING EVENT

10/13/2005

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77002-3094

\$315.74

Principal occupation / Job title (See Instructions)
ATTORNEY

Employer (See Instructions)
TINDALL & FOSTER, PC

Date

Full name of contributor out-of-state PAC(ID# _____)
GARZA, MARTHA

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/06/2005

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77093-2021

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
GATHMANN, WILLIAM D.

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/22/2005

Contributor address; City; State; Zip Code
[REDACTED]
KINGWOOD, TX 77345

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
GONZALEZ, JOSE F.

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/04/2005

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77059

\$500.00

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: 6/14 Report: 8/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

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

GONZALEZ, ROBERTO

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)
FUNDRAISING EVENT

10/23/2005

6 Contributor address; City; State; Zip Code

HOUSTON, TX 77019

\$997.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

GRIJALVA, ANTONIO

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/25/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77055

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

HAYES, ROBERTO

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/18/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77065

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

HERNANDEZ, RICARDO

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/13/2005

Contributor address; City; State; Zip Code

SUGARLAND, TX 77479

\$1,000.00

Principal occupation / Job title (See Instructions)
FRANCHISE OWNER

Employer (See Instructions)
TAQUERIAS ARANDAS

Date

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

JAWDAT, I.M.

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/12/2005

Contributor address; City; State; Zip Code

HUMBLE, TX 77338

\$100.00

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: 7/14 Report: 9/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00001234

4 Date 5 Full name of contributor out-of-state PAC(ID# _____)
10/03/2005 JONES, JOHN WILSON

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/03/2005

6 Contributor address; City; State; Zip Code

HOUSTON, TX 77004-1135

\$200.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/24/2005 KHAN, MOHAMMAD M.

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/24/2005

Contributor address; City; State; Zip Code

SUGARLAND, TX 77478

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/02/2005 LANGLOIS, JOSEPH

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/02/2005

Contributor address; City; State; Zip Code

CONROE, TX 77302

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/19/2005 LAWYER, KEITH

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/19/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77027

\$100.00

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
KEITH LAWYER MANAGEMENT

Date Full name of contributor out-of-state PAC(ID# _____)
10/27/2005 LOPEZ, NICOLAS

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/27/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77056

\$500.00

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: 8/14 Report: 10/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date **5** Full name of contributor out-of-state PAC(ID# _____)
10/26/2005 MALIK, AHMAD

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/26/2005

6 Contributor address; City; State; Zip Code

SUGARLAND, TX 77478

\$2,000.00

9 Principal occupation / Job title (See Instructions)
BUSINESSMAN

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/18/2005 MARAZITA, JOSE (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/18/2005

Contributor address; City; State; Zip Code

KATY, TX 77450

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/03/2005 MATAMOROS, ABELARDO (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/03/2005

Contributor address; City; State; Zip Code

HOUSTON, TX 77057

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/11/2005 MCKINNEY, RANDOLPH (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/11/2005

Contributor address; City; State; Zip Code

BELLAIRE, TX 77402-1231

\$150.00

Principal occupation / Job title (See Instructions)
HOUSE SUPERVISOR

Employer (See Instructions)
ALLEY THEATRE

Date Full name of contributor out-of-state PAC(ID# _____)
10/24/2005 MEMON, MANZOOR

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/24/2005

Contributor address; City; State; Zip Code

DEER PARK, TX 77536

\$200.00

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: 9/14 Report: 11/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission files)

4 Date 5 Full name of contributor out-of-state PAC(ID# _____)
10/19/2005 MONTY, SARAH DEE

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77084

\$5,000.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/20/2005 PALMA, JUANITA

Amount of contribution (\$)

In-kind contribution description (if applicable)
ADVERTISEMENT

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77076

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/18/2005 PARSLEY, JESUS

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
HORIZON CITY, TX 79928

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/21/2005 PERRY, DOYLENE

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77058

\$5,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
10/25/2005 PITTS, JOHN R.

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77227

\$150.00

Principal occupation / Job title (See Instructions)
BUSINESS OWNER

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 10/14 Report: 12/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

10/03/2005

5 Full name of contributor out-of-state PAC(ID# _____)
RAMIREZ, REYNALDO Jr.

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

\$200.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)
ATTORNEY

10 Employer (See Instructions)

Date

10/03/2005

Full name of contributor out-of-state PAC(ID# _____)
RAMIREZ, RITA

Contributor address; City; State; Zip Code
HOUSTON, TX 77092-1203

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/11/2005

Full name of contributor out-of-state PAC(ID# _____)
RIVAS, JOSE GERMAN

Contributor address; City; State; Zip Code
HOUSTON, TX 77041

Amount of contribution (\$)

\$3,000.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)
PRESIDENT

Employer (See Instructions)
HERMAN PACKAGING

Date

10/18/2005

Full name of contributor out-of-state PAC(ID# _____)
RIVERA, CORALINA

Contributor address; City; State; Zip Code
HOUSTON, TX 77010

Amount of contribution (\$)

\$304.15

In-kind contribution description (if applicable)
FUNDRAISING EVENT

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/27/2005

Full name of contributor out-of-state PAC(ID# _____)
ROMERO, C.E.

Contributor address; City; State; Zip Code
HOUSTON, TX 77077

Amount of contribution (\$)

\$100.00

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: 11/14 Report: 13/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor out-of-state PAC(ID# _____)
RUTH, GUERA

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

10/03/2005

6 Contributor address; City; State; Zip Code

\$100.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
SALDANA, DAGOBERTO

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/21/2005

Contributor address; City; State; Zip Code

\$5,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
SAUCEDA, JOSE A.

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/19/2005

Contributor address; City; State; Zip Code
HOUSTON, TX 77073

\$500.00

Principal occupation / Job title (See Instructions)
BUSINESSMAN

Employer (See Instructions)
ADAN QUALITY HOMES

Date

Full name of contributor out-of-state PAC(ID# _____)
SAZEGAR, HUGH

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/12/2005

Contributor address; City; State; Zip Code
HOUSTON, TX 77002

\$100.00

Principal occupation / Job title (See Instructions)
PRESIDENT/CEO

Employer (See Instructions)
TECHESS GROUP

Date

Full name of contributor out-of-state PAC(ID# _____)
SERRANO, JUAN

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

10/27/2005

Contributor address; City; State; Zip Code

\$1,000.00

Principal occupation / Job title (See Instructions)
DOCTOR

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: 12/14 Report: 14/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date
10/03/2005

5 Full name of contributor out-of-state PAC(ID# _____)
SILVA, ISABEL C.

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

10/03/2005

6 Contributor address; City; State; Zip Code

\$100.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
10/19/2005

Full name of contributor out-of-state PAC(ID# _____)
SKINNER, VIRGIL

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/19/2005

Contributor address; City; State; Zip Code

\$100.00

HOUSTON, TX 77074

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/25/2005

Full name of contributor out-of-state PAC(ID# _____)
STENOIEN, RANDALL

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/25/2005

Contributor address; City; State; Zip Code

\$1,000.00

HOUSTON, TX 77006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/18/2005

Full name of contributor out-of-state PAC(ID# _____)
THIES, KENNETH J.

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/18/2005

Contributor address; City; State; Zip Code

\$100.00

HOUSTON, TX 77042-1414

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/11/2005

Full name of contributor out-of-state PAC(ID# _____)
TING, JOE

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/11/2005

Contributor address; City; State; Zip Code

\$250.00

HOUSTON, TX 77042

Principal occupation / Job title (See Instructions)
INVESTOR

Employer (See Instructions)
WPM HOLDINGS

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

1 PAGE #

Schedule: 13/14 Report: 15/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filer's)

4 Date
10/18/2005

5 Full name of contributor out-of-state PAC(ID# _____)
TOPPINS, WILKA (Ms.)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)
FUNDRAISING EVENT

6 Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77056

\$304.15

9 Principal occupation / Job title (See Instructions)
ATTORNEY

10 Employer (See Instructions)
SELF EMPLOYED

Date
10/13/2005

Full name of contributor out-of-state PAC(ID# _____)
WALLACE, WILLIAM BRANTON

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77057

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/20/2005

Full name of contributor out-of-state PAC(ID# _____)
WANG, DON J.

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
HOUSTON, TX 77036

\$1,000.00

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
METRO BANK

Date
10/25/2005

Full name of contributor out-of-state PAC(ID# _____)
YBARRA, RUSSELL

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
PASADENA, TX 77505

\$1,500.00

Principal occupation / Job title (See Instructions)
OWNER

Employer (See Instructions)
GRINGO'S MEXICAN KITCHEN

Date
10/26/2005

Full name of contributor out-of-state PAC(ID# _____)
YOUNG, RICHARD

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
[REDACTED]
SPRING, TX 77388

\$1,500.00

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: 14/14 Report: 16/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission file#)

4 Date

10/13/2005

5 Full name of contributor out-of-state PAC(ID#)
ZAKA, MOHAMMAD

6 Contributor address: City; State; Zip Code

MISSOURI CITY, TX 77459-2522

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/6 Report: 17/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00001234

4 Date

10/07/2005

5 Payee name
AVILAN, ARNULFO**6** Payee address; City; State; Zip Code
2818 AUSTIN ST. - APT. #6
HOUSTON, TX 77004**7**Amount
(\$)

\$1,000.00

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

POSTERS

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

10/08/2005

Payee name
CARRENO GROUP INCPayee address; City; State; Zip Code
714 PARKER ST.
HOUSTON, TX 77007Amount
(\$)

\$223.00

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

PRINTING EXPENSE

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:

Date

10/08/2005

Payee name
CARRENO GROUP INCPayee address; City; State; Zip Code
714 PARKER ST.
HOUSTON, TX 77007Amount
(\$)

\$7,106.50

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

POLITICAL CONSULTING

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:

Date

10/13/2005

Payee name
CARRENO GROUP INCPayee address; City; State; Zip Code
714 PARKER ST.
HOUSTON, TX 77007Amount
(\$)

\$1,094.10

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

FUNDRAISING.

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/6 Report: 18/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00001234

4 Date	5 Payee name CARRENO GROUP INC	7 Amount (\$)
10/22/2005	6 Payee address; City; State; Zip Code 714 PARKER ST. HOUSTON, TX 77007	\$1,806.66

8 Purpose of payment (See instructions regarding type of information required.) FUNDRAISING EXPENSE	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
---	---

Date	Payee name CARRENO GROUP INC	Amount (\$)
10/25/2005	Payee address; City; State; Zip Code 714 PARKER ST. HOUSTON, TX 77007	\$12,666.00

Purpose of payment (See instructions regarding type of information required.) ADVERTISING	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
---	---

Date	Payee name CARRENO GROUP INC	Amount (\$)
10/25/2005	Payee address; City; State; Zip Code 714 PARKER ST. HOUSTON, TX 77007	\$8,255.00

Purpose of payment (See instructions regarding type of information required.) ADVERTISING	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
---	---

Date	Payee name COURTYARD	Amount (\$)
10/17/2005	Payee address; City; State; Zip Code 1885 ST. JAMES PLACE HOUSTON, TX 77056	\$764.25

Purpose of payment (See instructions regarding type of information required.) FUNDRAISING EVENT	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
---	---

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/6 Report: 19/22

2 FILER NAME ACOSTA, HIPOLITO M. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00001234

4 Date

5 Payee name
CUMMINS, JANE

7 Amount
(\$)

10/03/2005

6 Payee address; City; State; Zip Code
5523 ASHMERE LN
SPRING, TX 77379

\$57.48

8 Purpose of payment (See instructions regarding type of information required.)
REIMBURSEMENT - ADVERTISING

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

Office sought:
Office held:

Date

Payee name
DE LA ISLA, JAIME

Amount
(\$)

10/11/2005

Payee address; City; State; Zip Code

\$200.00

Purpose of payment (See instructions regarding type of information required.)
CAMPAIGN SERVICES & EXPENSES

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

Office sought:
Office held:

Date

Payee name
FLORES, LEONARD

Amount
(\$)

10/20/2005

Payee address; City; State; Zip Code

\$50.00

Purpose of payment (See instructions regarding type of information required.)
CAMPAIGN OFFICE WORK

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

Office sought:
Office held:

Date

Payee name
GARCIA, RALPH

Amount
(\$)

10/01/2005

Payee address; City; State; Zip Code
AFAR CONCEPTS - SIGN HERE
2810 LEE LAND
HOUSTON, TX 77003

\$1,154.00

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

** Complete if direct expenditure to benefit C/OH **
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: 20/22**2** FILER NAME ACOSTA, HIPOLITO M. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00001234**4** Date

10/05/2005**5** Payee name
GARCIA, RALPH**6** Payee address; City; State; Zip Code
AFAR CONCEPTS/SIGN HERE
2810 LEELEND
HOUSTON, TX 77003**7** Amount
(\$)

\$550.00**8** Purpose of payment (See instructions regarding type of information required.)
SIGN DISTRIBUTION**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:Date

10/13/2005Payee name
GARCIA, RALPHPayee address; City; State; Zip Code
AFAR CONCEPTS
2810 LEELEND
HOUSTON, TX 77003Amount
(\$)

\$325.00Purpose of payment (See instructions regarding type of information required.)
SIGN DISTRIBUTION**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:Date

10/13/2005Payee name
NORTHLAND DISTRIBUTING

Payee address; City; State; Zip Code

Amount
(\$)

\$1,125.00Purpose of payment (See instructions regarding type of information required.)
CAMPAIGN MATERIALS**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:Date

10/20/2005Payee name
OFFICE DEPOT
TX

Payee address; City; State; Zip Code

Amount
(\$)

\$36.99Purpose of payment (See instructions regarding type of information required.)
OFFICE SUPPLIES**** Complete if direct expenditure to benefit C/OH ****
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: 21/22

2 FILER NAME ACOSTA, HIPO ITO M. (Mr.)**3** ACCOUNT # (Ethics Commission filers)**4** Date

10/13/2005

5 Payee name
RELIANT ENERGY
TX**6** Payee address; City; State; Zip Code**7**Amount
(\$)

\$163.52

8 Purpose of payment (See instructions regarding type of information required.)
ELECTRICITY**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

10/10/2005

Payee name
RICHMOND PRINTING LLCPayee address; City; State; Zip Code
5825 SCHUMACHER
HOUSTON, TX 77057Amount
(\$)

\$1,833.77

Purpose of payment (See instructions regarding type of information required.)
LETTERHEADS, CARDS, PUSH CARDS**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:

Date

10/13/2005

Payee name
SBCPayee address; City; State; Zip Code
555 MAIN ST. - RM 228-OR
BEAUMONT, TX 77701Amount
(\$)

\$459.45

Purpose of payment (See instructions regarding type of information required.)
TELEPHONE SERVICE**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held:

Date

10/15/2005

Payee name
SPRINTPayee address; City; State; Zip Code
17195 TOMBALL PKWY. BLDG. 4
HOUSTON, TX 77064Amount
(\$)

\$173.40

Purpose of payment (See instructions regarding type of information required.)
TEL. EQUIPMENT**** Complete if direct expenditure to benefit C/OH ****
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: 22/22

2 FILER NAME ACOSTA, HIPOLITO M (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name SPRINT DIGITAL PRINT	7 Amount (\$)
10/19/2005	6 Payee address; City; State; Zip Code 17195 TOMBALL PARKWAY BLDG 4 HOUSTON, TX 77064	\$2,570.94

8 Purpose of payment (See instructions regarding type of information required.) ADVERTISING	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
--	--

Date	Payee name U.S. POSTMASTER	Amount (\$)
10/20/2005	Payee address; City; State; Zip Code BARBARA JORDAN MAIN POST OFFICE HOUSTON, TX 77201-9978	\$111.00

Purpose of payment (See instructions regarding type of information required.) POSTAGE	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
--	--

Date	Payee name U.S. POSTMASTER	Amount (\$)
10/20/2005	Payee address; City; State; Zip Code BARBARA JORDAN MAIN POST OFFICE HOUSTON, TX 77201-9978	\$111.50

Purpose of payment (See instructions regarding type of information required.) POSTAGE	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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