Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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): 00

2 Total pages filed: 1/40

OFFICE USE ONLY

Date Received: 10/11 2005 RECEIVED CITY SECRETARY

Date Hand-Delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. FIRST: Michael MI:
NICKNAME: LAST: Berry SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address
ADDRESS / PO BOX: 1907 Southwest Freeway APT / SUITE #: CITY: Houston, TX STATE: ZIP CODE: 77098

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (832) PHONE NUMBER: 201.5308 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mr. FIRST: Walter MI:
NICKNAME: LAST: Zivley SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 1907 Southwest Freeway APT / SUITE #: CITY: Houston, STATE: TX ZIP CODE: 77098

8 CAMPAIGN TREASURER PHONE
AREA CODE: (832) PHONE NUMBER: 201.5308 EXTENSION:

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: 07 / 01 / 05 THROUGH Month Day Year: 09 / 29 / 05

11 ELECTION
ELECTION DATE Month Day Year: / /
ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any): Houston City Councilman

13 OFFICE SOUGHT (if known):

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

16 ACCOUNT # (Ethics Commission filers) 00

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 74,626.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4. **TOTAL POLITICAL EXPENDITURES**	$ 57,133.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 210,068.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

CHRISTOPHER MAYS
Notary Public, State of Texas
My Commission Expires
July 11, 2007

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MICHAEL BERRY, this the 11th day of October, 20 05, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Christopher M. Mays	Christopher M. Mays	Notary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 3/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/5/05	Tom Currie-Vicaro [redacted] Missouri City, TX 77459	50.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/11/05	BDC Bar & Grill II LP [redacted] Houston, TX 77006	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/11/05	Sanford Criner [redacted] Houston, TX 77019	1000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/5/05	Conrad Masterson [redacted] Houston, TX 77098	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/20/05	Carlos Garcia [redacted] Houston, TX 77023	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 4/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/22/05	Fulbright & Jaworski LLP Texas Comm. [redacted] Houston, TX 77010	1000.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/12/05	Garnet Coleman [redacted] Houston, TX 77288	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
	David Greenberg [redacted] Houston, TX 77057	5000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/29/05	David Siddall [redacted] Spring, TX 77373	500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/28/05	Bob Perry [redacted] Houston, TX 77058	5000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 5/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/28/05	Doylene Perry [redacted] Houston, TX 77058	5000.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/1/05	Rosie Bener [redacted] Houston, TX 77228	25.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/3/05	Carroll Shaddock [redacted] Houston, TX 77002	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/11/05	Paul Bishop [redacted] Houston, TX 77098	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/14/05	J. Carter Breed [redacted] Houston, TX 77024	2000.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 6/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address: City: State: Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/28/05	Lawrence Ramming [redacted] Houston, TX 77027	500.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/19/05	Mary and Marc Folladori [redacted] Houston, TX 77005	1000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/19/05	Tadd Tellepsen [redacted] Houston, TX 77063	500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/29/05	J. Dickson Rogers [redacted] Houston, TX 77056	200.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/22/05	HOU CONPAC [redacted] HOUSTON, TX 77292	1000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 7/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/1/05	Norman Frede [redacted] Houston, TX	250.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/2/05	Jon & Rebecca Hlavinka [redacted] Houston, TX 77025	150.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/2/05	Stanford Alexander [redacted] Houston, TX 77024	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/5/05	Robert Gray [redacted] Houston, TX 77024	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/6/05	D.N. Baker 8705 Katy Freeway, Suite 401 Houston, TX 77024	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 8/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/2/05	Richard Everett [redacted] Houston, TX 77002	250.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/1/05	Colleen Barry [redacted] Houston, TX 77098	50.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/6/05	Russell Coots [redacted] Houston, TX 77057	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/6/05	E. Deane Ranaly [redacted] Houston, TX 77027	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/31/05	Robert Orr, Jr. [redacted] Houston, TX 77057	1000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 9/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address: City: State: Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/10/05	Rachel Frazier [redacted] Houston, TX 77019	100.00	

9 Principal occupation / Job title (See Instructions): 10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/8/05	Tim Bowers [redacted] Houston, TX 77005	1000.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/12/05	Jim and Jane Wise [redacted] Kingwood, TX 77345	1000.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/8/05	T. H. Dinerstein [redacted] Houston, TX 77057	250.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/11/05	Stephen Tipps [redacted] Houston, TX 77019	100.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 10/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/11/05	Walter Dell Parnell [redacted] Houston, TX 77033	25.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	David Ferdman [redacted] Bellaire, TX 77401	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Robert Jewell [redacted] Houston, TX 77056	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Lawrence Levinson [redacted] Sugarland, TX 77478	1000.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Charles Roff [redacted] Houston, TX 77002	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 11/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address: City State Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/13/05	Doug + Gloria Levesque [redacted] Kingwood, TX 77339	250.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	George Strake [redacted] Houston, TX 77002	150.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/8/05	John Hastings [redacted] Houston, TX 77027	50.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	The Aron Companies [redacted] Houston, TX 77024	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City State Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	WD Kvinta [redacted] Houston, TX 77227	100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 12|40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address: City: State: Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/14/05	Jack S. Blanton, Sr. [redacted] Houston, TX 77098	250.00	

9 Principal occupation / Job title (See Instructions):
10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Gregory Tilton [redacted] Houston, TX 77027	50.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Scott Wizig [redacted] Houston, TX 77271	250.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	Terry Looper [redacted] Houston, TX 77079	2500.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	Giorgio Borlenghi [redacted] Houston, TX 77056	1000.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 13|40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/15/05	George Littell [redacted] Houston, TX 77002	1500.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	Charles King [redacted] Friendswood, TX 77546	25.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/05	Richard Bohan [redacted] Houston, TX 77007	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	Malcolm Morris [redacted] Houston, TX 77019	200.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/13/05	Earnest & Bobbie Horne [redacted] Houston, TX 77015	100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 14/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/14/05	Barry Lewis [redacted] Houston, TX 77027	1000.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/05	Vickie & Lyle Henkel [redacted] Houston, TX 77024	1000.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/05	Scott Anderson [redacted] Houston, TX 77024	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/05	Stephen Sweet [redacted] Houston, TX 77079	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/05	Beth & Joe Weikerth [redacted] Houston, TX 77024	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 15/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/16/05	Patricia Sherrard-Lee [redacted] Houston, TX 77029	100.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/05	Gerald & Candy Schlief [redacted] Houston, TX 77025	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/05	Bill Davis [redacted] Houston, TX 77098	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/19/05	Walter Zivley [redacted] Houston, TX 77002	5000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/18/05	John Kelly Fry [redacted] Houston, TX 77042	100.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 16|40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/15/05	Ivy Davis Levingston [redacted] Missouri City, TX 77489	50.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/17/05	Bill Swanstrom [redacted] Houston, TX 77079	1000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/05	Marcia Faschingbauer [redacted] Houston, TX 77023	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Paul Broussard [redacted] Houston, TX 77079	200.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Josh Bhatia [redacted] Houston, TX 77056	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 17/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/21/05	Roy Marsh [redacted] Ringwood, TX 77345	500.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Ranney & Linda McDonough [redacted] Bellaire, TX 77401	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Truman Edminster [redacted] Houston, TX 77006	1000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Paul & Leslie Strug [redacted] Houston, TX 77008	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/05	3 D/1 PAC [redacted] Houston, TX 77027	1000.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 18/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address: City: State: Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/21/05	Rudolph Bruhns [redacted] Houston, TX 77025	1000.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Rodney Windham [redacted] Houston, TX 77057	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/12/05	W. Edward Martiny, Jr. [redacted] Houston, TX 77082	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/22/05	Joseph Cesaratto [redacted] Houston, TX 77006	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address: City: State: Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/8/05	BAC-PAC [redacted] Houston, TX 77057	500.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 19|40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/18/05	Paul Frison [redacted] Houston, TX 77056	250.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	Amegy Bank of Texas PAC [redacted] Houston, TX 77027	1000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/12/05	Associated Builders & Contractors of Greater Hou PAC [redacted] Houston, TX 77098	1000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/19/05	Richard Weekley [redacted] Houston, TX 77055	1000.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Pat Swanson [redacted] Houston, TX 77030	250.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 20/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/21/05	Steve Stewart [redacted] Humble, TX 77396	1000.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/19/05	Patricia Tilton [redacted] Houston, TX 77005	50.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Jackson Hill Development LLC [redacted] West Bloomfield, MI 48322	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Southwest Airlines Freedom Fund [redacted] Dallas, TX 75235	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/26/05	David Ciarella [redacted] Richmond, TX 77469	25.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 21|40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/21/05	PM Realty Group, L.P. [redacted] Houston, TX 77002	1000.00	

9 Principal occupation / Job title (See Instructions):
10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/26/05	Celia Morgan [redacted] Houston, TX 77277	25.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Wayne Klotz [redacted] Houston, TX 77079	500.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/16/05	Dionel Aviles [redacted] Houston, TX 77077	500.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/27/05	George Szantagh [redacted] Houston, TX 77006	250.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 22/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/26/05	Bill & Melinda Kacal [redacted] Houston, TX 77019	500.00	

9 Principal occupation / Job title (See Instructions): 10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/20/05	Jeffrey Gerber [redacted] Spring, TX 77379	500.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/26/05	Cher Longoria [redacted] Houston, TX 77006	250.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Alvin Owsley [redacted] Houston, TX 77027	1000.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/22/05	Sara Brooks [redacted] Houston, TX 77098	250.00	

Principal occupation / Job title (See Instructions): Employer (See Instructions):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 23/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/15/05	John Yoars [redacted] The Woodlands, TX 77380	250.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/14/05	R. A. Lane [redacted] Houston, TX 77005	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Philip Lau [redacted] Houston, TX 77002	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/28/05	Ramesh Cherivirala [redacted] Sugarland, TX 77478	1001.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/28/05	Phillip Endom, Jr. [redacted] Houston, TX 77079	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 24/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/28/05	Franklin Jones [redacted] Houston, TX 77002	2500.00	

9 Principal occupation / Job title (See Instructions):
10 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/20/05	Burlington Northern Santa Fe RAILPAC [redacted] Ft. Worth, TX 76161	1000.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/3/05	Enterprise Rent-A-Car Company PAC [redacted] St. Louis, MO 63105	2500.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/05	Sheryl Rapp [redacted] Bellaire, TX 77401	250.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/29/05	Joe Evans [redacted] Houston, TX 77065	250.00	

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 25/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/13/05	Locke Liddell & Sapp LLP [redacted] Houston, TX 77002	1000.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 26/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/1/05	Jacob Majors	500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/7/05	Michael Berry Properties	3000.00

Purpose of payment (See instructions regarding type of information required.): Rental fee, Campaign HQ, equipment

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/7/05	Herb Butrum	1500.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/12/05	NY Times	23.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F. 27/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/13/05	Best Buy	378.86

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/15/05	Jacob Majors	500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/22/05	USPS	120.08

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/22/05	Aaron Brothers	47.60

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

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

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 28/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/29/05	Jacob Majors	500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/29/05	Herb Butrum	1500.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/1/05	Amegy Bank	3940.80

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/1/05	Texas Workforce Commission	3.48

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 29/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/1/05	Houston Chronicle	15.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/1/05	Michael Berry Properties	3000.00

Purpose of payment (See instructions regarding type of information required.): Rental fee, Campaign HQ, Equipment

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/05	Office Depot	1162.55

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/05	Sunrise Groceries	11.21

Purpose of payment (See instructions regarding type of information required.): Drinks for Volunteers

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 30/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/2/05	Late Night Pie	51.43

8 Purpose of payment (See instructions regarding type of information required.): Food for volunteers

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/05	Dell Sales	571.57

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/05	Fast Clampitt	99.38

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/05	Nanofire Computers	649.50

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 31/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/2/05	Monica Aizpurua	3207.70

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/9/05	NY Times	23.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/11/05	USPS	111.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/12/05	Jacob Majors	500.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 32/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/15/05	Jacob Majors	250.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/17/05	J2 Fax Broadcasting	350.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/17/05	Micro Center	389.69

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/17/05	Late Night Pie	39.08

Purpose of payment (See instructions regarding type of information required.): Food for Volunteers

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 33/40

2 FILER NAME: Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/17/05	Office Max	1058.58

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/17/05	Office Depot	162.36

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/17/05	Copy.com	1753.65

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/22/05	Michael Berry Properties	3000.00

Purpose of payment (See instructions regarding type of information required.): Rental fee, Campaign HQ. Equipment

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 34/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/23/05	Sprint Digital Print	958.01

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/23/05	Tricia Gernand	135.54

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/23/05	Herb Butrum	1500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/23/05	Bosworth Papers	64.55

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 35/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/24/05	USPS	1850.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/24/05	Fast Clampitt	163.29

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/24/05	Houston Chronicle	177.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/26/05	Jacob Majors	750.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 36/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/26/05	Monica Aizpurua	3207.70

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/28/05	Advarion. Inc.	2000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/31/05	Houston Chronicle	15.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/2/05	USPS	555.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 37/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/2/05	Sprint Digital Print	5049.86

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/2/05	Nanofire Computers	411.35

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/6/05	City of Houston	503.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/6/05	NY Times	23.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 38/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/9/05	Jacob Majors	750.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/12/05	J2 Fax Broadcasting	200.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/16/05	Amegy Bank	2627.20

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/16/05	Sprint Digital Print	773.99

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 39/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/20/05	Papa Johns	14.41

8 Purpose of payment (See instructions regarding type of information required.): Food for Volunteers

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/20/05	Jed Stewart	40.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/21/05	Jacob Majors	750.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/21/05	Jed Stewart	40.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 40/40

2 FILER NAME Michael Berry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/22/05	Jewish Herald Voice	75.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/28/05	Ralph Garcia	6000.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/28/05	Sears	80.00

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name | Office sought | Office held

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