

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) 11111111	2 PAGE # 1 of 25
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Anne	MI
	NICKNAME Anne	LAST Clutterbuck	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; 2476 Bolsover, #428 Houston, TX 77005	APT / SUITE #;	CITY; STATE; ZIP CODE
	AREA CODE	PHONE NUMBER	EXTENSION
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR Mr.	FIRST John	MI
6 CAMPAIGN TREASURER NAME	NICKNAME John	LAST Clutterbuck	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 2476 Bolsover, #428 Houston, TX 77005	APT / SUITE #;	CITY; STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 520-1741	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 09/30/2005	THROUGH	Month Day Year 10/29/2005
11 ELECTION	ELECTION DATE Month Day Year 11/08/2005	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Houston City Council, Dist C	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME Clutterbuck, Anne (Mrs.)

16 ACCOUNT # (Ethics Commission filers)
11111111

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 **\$ 440.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 26,729.49**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 191.73**

4. TOTAL POLITICAL EXPENDITURES **\$ 32,909.47**

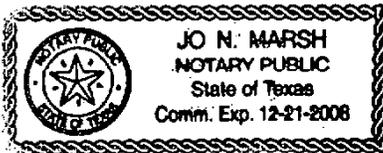
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 16,788.52**

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.

Anne U. Clutterbuck

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ANNE U. CLUTTERBUCK this the 31st day of October, 2008, to certify which, witness my hand and seal of office.

Jo N. Marsh
Signature of officer administering oath

JO N. MARSH
Print name of officer administering oath

NOTARY PUBLIC
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: 3/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/06/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alcorn, Charles (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77079-6821	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Associated Builders & Contractors Contributor address; City; State; Zip Code Houston, TX 77098	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/01/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Associated Partnership, Ltd Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of contribution (\$) \$1,250.00	In-kind contribution description (if applicable) rent of HQ
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Baker, James A. Contributor address; City; State; Zip Code Houston, TX 77019	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Baker Communications	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bechtol, Anne Contributor address; City; State; Zip Code Houston, TX 77037	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: 2/14 Report: 4/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/20/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Benge, Chester Jr. 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77063	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bernicker, Daphne Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77019	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Boylan, Michael B. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77018	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a	
Date 10/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bryan, Chris Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burgert, David Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77041	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: 3/14 Report: 5/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/06/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cabaniss, John 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cialone, Brenda Cook (Ms.) Contributor address; City; State; Zip Code Houston, TX 77002-2781	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Clutterbuck, John Contributor address; City; State; Zip Code Houston, TX 77005	Amount of contribution (\$) \$140.98	In-kind contribution description (if applicable) postage & supplies
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cohen, Joan Contributor address; City; State; Zip Code Houston, TX 77005	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Costello, Stephen Contributor address; City; State; Zip Code Houston, TX 77042	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Costello, Inc	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/14 Report: 6/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/24/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Crews, Katie	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED] Dallas, TX 75225			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Duncan, Dan	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77210			
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) EPCO, Inc	
Date 10/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Eyberg, Lynn	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fairfield, Stephan	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77219-0914			
Principal occupation / Job title (See Instructions) <i>Executive</i>		Employer (See Instructions) <i>Covenant Capital</i>	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Farrell, William J	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Spring, TX 77379			
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: 5/14 Report: 7/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission files) 11111111	
4 Date 10/05/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Foust, Lawrence 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gonzalez, Justo Penn Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Haik, Mac Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77079	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Mac Haik Enterprises	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hefner, Kindra Contributor address; City; State; Zip Code [REDACTED] Kingwood, TX 77345	Amount of contribution (\$) \$677.49	In-kind contribution description (if applicable) postage, printing, envelopes for mailer
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Hefner & Assoc.	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hightower, Melanie Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77057	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: 6/14 Report: 8/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/06/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hodges, Mark 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Horton, Iris Contributor address; City; State; Zip Code [REDACTED] Dr. Houston, TX 77055	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hudson, Diana M. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77019-1008	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hughes, Katherine Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jewell, Robert Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77056	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Andrews Kurth	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/14 Report: 9/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/20/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Johnson, Michael	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code Houston, TX 77024			
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions) n/a	
Date 10/05/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jones, Bob	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Houston, TX 77081			
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jones & Carter	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jones, Bob	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Houston, TX 77081			
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jones & Carter	
Date 10/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Keeton, Richard	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Houston, TX 77002			
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nickens Keeton Lawless Farrell Flack LLP	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Knapp, Christopher	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Houston, TX 77056			
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Chilton Capitol	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/14 Report: 10/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/21/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lapin & Landa, LLP	7 Amount of contribution (\$) \$546.29	8 In-kind contribution description (if applicable) printing & postage for support letter
6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77002-7371			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lightfoot, Robert H.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77063			
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Cherokey Piping	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lucke, Nancy	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77098			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lummis, David	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77019			
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Houston Trust Company	
Date 10/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marsh, Jo	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77025			
Principal occupation / Job title (See Instructions) Executor		Employer (See Instructions) Mrs. Theodore Law's Estate	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/14 Report: 11/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/25/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moore, Catherine 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Morris, Peter Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moss, Melissa Contributor address; City; State; Zip Code 4004 Branard Houston, TX 77027	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Motion Machinery Contributor address; City; State; Zip Code PO Box 1776 Tomball, TX 77377	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mullinax, Ronald Contributor address; City; State; Zip Code 114940 Westheimer, #700 Houston, TX 77077	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Exec VP		Employer (See Instructions) Brown & Gay	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/14 Report: 12/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/25/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nielsen, Ronald 6 Contributor address; City; State; Zip Code [REDACTED] Wimberley, TX 78676	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Exec VP		10 Employer (See Instructions) RG Miller	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) O'Brien, Urban Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77077	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director, Govt & Community Affairs		Employer (See Instructions) Apache Corp.	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Randall, Leslie Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/24/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rapopr, N. B. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77006	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robinson, Kent Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Andrews Kurth	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/14 Report: 13/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/25/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ross, Jeff 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) Pale Engineering	
Date 10/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sergesketter, Mary Contributor address; City; State; Zip Code Houston, TX 77079	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/05/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shoemake, Carrie Contributor address; City; State; Zip Code Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/26/2005	* Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sim, Huny Contributor address; City; State; Zip Code Houston, TX 77005	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Satsun	
Date 10/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Skelly, James G. Contributor address; City; State; Zip Code Houston, TX 77079	Amount of contribution (\$) \$50.73	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: 12/14 Report: 14/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/28/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Spiers, J. E. 6 Contributor address; City; State; Zip Code [REDACTED] Bellaire, TX 77401	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stabell, Richard Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77042	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tauch, Kyle Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77056	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thompson, Peggy Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Uhrbrock, Mary Contributor address; City; State; Zip Code [REDACTED] Roaring Gap, NC 28668	Amount of contribution (\$) \$74.00	In-kind contribution description (if applicable) postage
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/14 Report: 15/25	
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 10/28/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Urban, Lisa 6 Contributor address; City; State; Zip Code [REDACTED] Baytown, TX 77520-1104	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Village Republican Women Campaign Fund Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77027	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Walker, Geoffrey Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77098	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Andrews Kurth	
Date 10/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Walker, Judith Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77005	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/25/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Watson, Allen Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77007	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Cobb Fendley	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/14 Report: 16/25

2 FILER NAME Clutterbuck, Anne (Mrs.)

3 ACCOUNT # (Ethics Commission filers)

11111111

4 Date

10/28/2005

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

6 Contributor address; City; State; Zip Code

Houston, TX 77005

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)
Beverages & pastry for event

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/28/2005

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

Contributor address; City; State; Zip Code

Houston, TX 77005

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)
materials for making campaign necklaces

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/06/2005

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

Contributor address; City; State; Zip Code

Houston, TX 77042

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/9 Report: 17/25**2** FILER NAME Clutterbuck, Anne (Mrs.)**3** ACCOUNT # (Ethics Commission filers)
11111111

4 Date	5 Payee name	7 Amount (\$)
10/25/2005	AJL Advertising 6 Payee address; City; State; Zip Code 2512 Rio Grande St Austin, TX 78705	\$1,520.66

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

Date	Payee name	Amount (\$)
10/05/2005	Alexander's Fine Portrait Design 6 Payee address; City; State; Zip Code 312 Birdsall Houston, TX 77007	\$324.75

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

Date	Payee name	Amount (\$)
10/24/2005	America's Campaign Store 6 Payee address; City; State; Zip Code PO Box 1612 Jeffersonville, IN 47131-1612	\$255.00

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

Date	Payee name	Amount (\$)
10/05/2005	Anderson Design 6 Payee address; City; State; Zip Code 12402 Piping Rock Houston, TX 77077	\$1,190.00

Purpose of payment (See instructions regarding type of information required.)
design & printing**** 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: 2/9 Report: 18/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/05/2005	5 Payee name Anderson Design 6 Payee address; City; State; Zip Code 12402 Piping Rock Houston, TX 77077	7 Amount (\$) \$448.00
8 Purpose of payment (See instructions regarding type of information required.) design & printing		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/24/2005	Payee name Anderson Design Payee address; City; State; Zip Code 12402 Piping Rock Houston, TX 77077	Amount (\$) \$5,265.16
Purpose of payment (See instructions regarding type of information required.) design & printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/13/2005	Payee name Berings Payee address; City; State; Zip Code 3900 Bissonnet Houston, TX 77005	Amount (\$) \$392.95
Purpose of payment (See instructions regarding type of information required.) stationary		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/20/2005	Payee name Central Market Payee address; City; State; Zip Code 3815 Westheimer Houston, TX 77027	Amount (\$) \$617.07
Purpose of payment (See instructions regarding type of information required.) event catering & service		** 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: 3/9 Report: 19/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/24/2005	5 Payee name Cheramie, Beth 6 Payee address; City; State; Zip Code 21614 Bay Palms Drive Katy, TX 77449	7 Amount (\$) \$185.00
8 Purpose of payment (See instructions regarding type of information required.) data entry		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/05/2005	Payee name Dawson, Scott Payee address; City; State; Zip Code 10110 Charterwood Drive, #F203 Houston, TX 77070	Amount (\$) \$160.88
Purpose of payment (See instructions regarding type of information required.) computer repair		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/02/2005	Payee name Dickey, Leslie Payee address; City; State; Zip Code 9 Legend Lane Houston, TX 77024	Amount (\$) \$2,000.00
Purpose of payment (See instructions regarding type of information required.) campaign work		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/11/2005	Payee name FedexKinkos Payee address; City; State; Zip Code 4834 B Beechnut Houston, TX 77096	Amount (\$) \$129.90
Purpose of payment (See instructions regarding type of information required.) printing		** 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: 4/9 Report: 20/25**2** FILER NAME Clutterbuck, Anne (Mrs.)**3** ACCOUNT # (Ethics Commission filers)
11111111

4 Date	5 Payee name	7 Amount (\$)
10/25/2005	FedexKinkos 6 Payee address; City; State; Zip Code 4834 B Beechnut Houston, TX 77096	\$291.19

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

Date	Payee name	Amount (\$)
10/21/2005	Houston Hilight Publishing 6 Payee address; City; State; Zip Code 957 Nasa Parkway, #251 Houston, TX 77058	\$187.50

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

Date	Payee name	Amount (\$)
10/19/2005	International Mailing Systems 6 Payee address; City; State; Zip Code 815 Live Oak Houston, TX 77003	\$7,251.59

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

Date	Payee name	Amount (\$)
10/27/2005	International Mailing Systems 6 Payee address; City; State; Zip Code 815 Live Oak Houston, TX 77003	\$2,615.40

Purpose of payment (See instructions regarding type of information required.)
postage & mailing house service fees**** 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: 5/9 Report: 21/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/05/2005	5 Payee name Jewish Herald Voice 6 Payee address; City; State; Zip Code PO Box 153 Houston, TX 77001-0153	7 Amount (\$) \$630.00
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 10/05/2005	Payee name Kroger Payee address; City; State; Zip Code 9330 Jones Road Houston, TX 77064	Amount (\$) \$13.93
Purpose of payment (See instructions regarding type of information required.) Hostess gift		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/07/2005	Payee name Kroger Payee address; City; State; Zip Code 9330 Jones Road Houston, TX 77064	Amount (\$) \$45.06
Purpose of payment (See instructions regarding type of information required.) Hostess gifts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/25/2005	Payee name Kroger Payee address; City; State; Zip Code 9330 Jones Road Houston, TX 77064	Amount (\$) \$35.69
Purpose of payment (See instructions regarding type of information required.) food for 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: 6/9 Report: 22/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/25/2005	5 Payee name LArchmont Civic Assoc TX 6 Payee address; City; State; Zip Code	7 Amount (\$) \$127.63
8 Purpose of payment (See instructions regarding type of information required.) rent moonwalk for event		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/18/2005	Payee name Micro Center Payee address; City; State; Zip Code 1717 West Loop Drive Houston, TX 77027	Amount (\$) \$232.73
Purpose of payment (See instructions regarding type of information required.) printer cartridge		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/02/2005	Payee name Naedler, Jennifer Payee address; City; State; Zip Code 9407 Walnut Brook Ct. Houston, TX 77040	Amount (\$) \$2,000.00
Purpose of payment (See instructions regarding type of information required.) consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/21/2005	Payee name Office Depot Payee address; City; State; Zip Code 13802 NW Freeway Houston, TX 77040	Amount (\$) \$268.02
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:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/9 Report: 23/25

2 FILER NAME Clutterbuck, Anne (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
11111111

4 Date	5 Payee name Office Max	7 Amount (\$)
10/20/2005	6 Payee address; City; State; Zip Code 270 Meyerland Plaza Houston, TX 77096	\$179.04

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:
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Date	Payee name Office Max	Amount (\$)
10/28/2005	Payee address; City; State; Zip Code 270 Meyerland Plaza Houston, TX 77096	\$29.20

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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Date	Payee name Reliant Energy	Amount (\$)
10/24/2005	Payee address; City; State; Zip Code PO Box 1046 Houston, TX 77251	\$294.17

Purpose of payment (See instructions regarding type of information required.) Electricity	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name SBC	Amount (\$)
10/05/2005	Payee address; City; State; Zip Code P.O. Box 4699 Houston, TX 77097	\$107.16

Purpose of payment (See instructions regarding type of information required.) phone bill	** 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 PAGE # Schedule: 8/9 Report: 24/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/24/2005	5 Payee name SBC 6 Payee address; City; State; Zip Code P.O. Box 4699 Houston, TX 77097	7 Amount (\$) \$437.48
8 Purpose of payment (See instructions regarding type of information required.) phone bill		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/21/2005	Payee name Southwest News Payee address; City; State; Zip Code 5160 Spruce Bellaire, TX 77401	Amount (\$) \$936.00
Purpose of payment (See instructions regarding type of information required.) ads		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/11/2005	Payee name Symantec Payee address; City; State; Zip Code 20330 Stevens Creek Boulevard Cupertino, CA	Amount (\$) \$43.29
Purpose of payment (See instructions regarding type of information required.) software		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/12/2005	Payee name Symantec Payee address; City; State; Zip Code 20330 Stevens Creek Boulevard Cupertino, CA	Amount (\$) \$43.29
Purpose of payment (See instructions regarding type of information required.) software		** 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: 9/9 Report: 25/25
2 FILER NAME Clutterbuck, Anne (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 11111111
4 Date 10/05/2005	5 Payee name U. S. Postmaster 6 Payee address; City; State; Zip Code Fairbanks Station Houston, TX 77241	7 Amount (\$) \$1,480.00
8 Purpose of payment (See instructions regarding type of information required.) postage		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/20/2005	Payee name U. S. Postmaster Payee address; City; State; Zip Code Fairbanks Station Houston, TX 77241	Amount (\$) \$925.00
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 10/25/2005	Payee name U. S. Postmaster Payee address; City; State; Zip Code Fairbanks Station Houston, TX 77241	Amount (\$) \$1,480.00
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 10/25/2005	Payee name U. S. Postmaster Payee address; City; State; Zip Code Fairbanks Station Houston, TX 77241	Amount (\$) \$575.00
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: