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

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 0

2 Total pages this report: 1/16

OFFICE USE ONLY

Date Received

Date Hand-delivered

RECEIVED JAN 19 2005 CITY SECRETARY

Receipt # Amount

Date Processed

Date Imaged

3 COMMITTEE NAME
Friends of Michael Stafford

4 COMMITTEE ADDRESS
☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3405 Edloe St
Ste 380
Houston TX 77027

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
Pat
NICKNAME LAST SUFFIX
Oxford

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE
711 Louisiana
Suite 2900
Houston TX 77002

7 CAMPAIGN TREASURER'S MAILING ADDRESS
☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
711 Louisiana
Ste 2900
Houston TX 77002

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 221-1432

9 REPORT TYPE

- [X] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] Dissolution (attach PAC-DR)
- [ ] 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 10/24/2004 THROUGH Month Day Year: 12/31/2004

11 ELECTION

ELECTION DATE Month Day Year

ELECTION TYPE
☐ Primary ☐ Runoff ☐ General ☐ Special

GO TO PAGE 2

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME
Friends of Michael Stafford

ACCOUNT #
(Ethics Commission filers)

13 COMMITTEE PURPOSE
(Attach lists on plain paper to complete this report if necessary.)

- [ ] SUPPORT CANDIDATE
- [ ] OPPOSE CANDIDATE
- [x] ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME
Michael Stafford

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
Harris County Attorney

- [ ] SUPPORT MEASURE
- [ ] OPPOSE MEASURE

BALLOT IDENTIFICATION / #

ELECTION DATE
Month / Day / Year

DESCRIPTION

14 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)	$ 1000.00
3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
4.	**TOTAL POLITICAL EXPENDITURES**	$ 21469.43
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 31394.16
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

15 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.

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, 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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 2/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/25/2004	Olson & Olson 6 Contributor address; City; State; Zip Code 333 Clay Street Three Allen Center Suite 3485 Houston TX 77002	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 3/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/27/2004	Berryhill Baja Grill 5110 Buffalo Speedway Houston TX 77005	56.09

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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 ($)
10/26/2004	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	174.67

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Cell Phone

** 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 ($)
11/22/2004	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	125.74

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Cell Phones

** 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 ($)
12/29/2004	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	500.00

Purpose of expenditure (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 report: 4/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/29/2004	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	125.17

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Cell Phones

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 ($)
11/06/2004	Brennan's 3300 Smith St Houston TX 77006	873.07

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

-- 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 ($)
12/15/2004	Cafe Pappadeaux 2410 Richmond Ave Houston TX 77098	158.03

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

-- 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 ($)
10/28/2004	Cahill's On Durham 903 Durham Houston TX 77007	24.25

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

-- 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 report: 5/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/11/2004	Cahill's On Durham 903 Durham Houston TX 77007	25.24

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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 ($)
11/15/2004	Cahill's On Durham 903 Durham Houston TX 77007	53.75

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

** 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 ($)
10/29/2004	Carrabba's 3115 Kirby Houston TX 77098	210.63

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

** 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 ($)
12/10/2004	Congress Coffee Club 1019 Congress 15th floor Houston TX 77002	250.00

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

** 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 report: 6/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/13/2004	Damian's Cucina Italian 3011 Smith St Houston TX 77006	250.07

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

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 ($)
12/21/2004	DeJa Vu 12797 Westheimer Houston TX 77077	59.50

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

** 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 ($)
11/19/2004	Dell Computers 1 Dell Way Austin TX 78701	3044.02

Purpose of expenditure (See instructions regarding type of information required.)
Computer

** 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 ($)
12/20/2004	Dell Computers 1 Dell Way Austin TX 78701	38.43

Purpose of expenditure (See instructions regarding type of information required.)
Computer

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTIONGUIDE explains how to complete this form.

1 Total pages report: 7/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/26/2004	Don'Key Rest 5010 Spencer Highway Pasadena TX 77505	77.49

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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 ($)
10/28/2004	Floyds 1511 Shepherd Houston TX 77007	167.46

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

** 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 ($)
11/03/2004	Frank's Pizza 417 Travis Houston TX 77002	16.02

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

** 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 ($)
11/12/2004	Frank's Pizza 417 Travis Houston TX 77002	95.30

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

** 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 report: 8/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/27/2004	Fricasa LLC Houston TX 77002	121.24

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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 ($)
11/08/2004	G&E Impressions.Inc 6400 Westpark Houston TX 77057	4262.20

Purpose of expenditure (See instructions regarding type of information required.)
Miscellaneous Communications

** 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 ($)
11/22/2004	HBA 1001 Fannin Ste 1300 Houston TX 77002	75.00

Purpose of expenditure (See instructions regarding type of information required.)
Oficeholder:Luncheon-Meet & Greet

** 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 ($)
12/01/2004	HBA 1001 Fannin Ste 1300 Houston TX 77002	75.00

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Luncheon-Meet & Greet

** 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 report: 9/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/25/2004	Darlene Hadaway 5803 Flax Burton Humble TX 77346	91.90

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Office 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 ($)
11/03/2004	Darlene Hadaway 5803 Flax Burton Humble TX 77346	137.93

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Office 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 ($)
11/15/2004	Darlene Hadaway 5803 Flax Burton Humble TX 77346	177.51

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Office 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 ($)
12/15/2004	Darlene Hadaway 5803 Flax Burton Humble TX 77346	564.59

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

** 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 report: 10/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/26/2004	Eric Hale 3102 West Bay Area Blvd Friendswood TX 77546	533.13

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Computer

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 ($)
12/21/2004	Hector's Mexican Rest 105 Kenning Rd Crosby TX 77532	93.00

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

-- 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 ($)
12/29/2004	Hector's Mexican Rest 105 Kenning Rd Crosby TX 77532	72.60

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

-- 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 ($)
12/14/2004	Don Lightfoot 20503 Appaloosa Tr Crosby TX 77532	170.00

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Office Supplies

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 11/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/12/2004	MSN.Com 11245 Southeast 6th Street Bellevue WA 98004	21.95

8 Purpose of expenditure (See instructions regarding type of information required.)
Misc.Communications:Internet

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 ($)
12/12/2004	MSN.Com 11245 Southeast 6th Street Bellevue WA 98004	21.95

Purpose of expenditure (See instructions regarding type of information required.)
Misc. Communications:Internet

-- 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 ($)
11/24/2004	Next Project EDS,Inc 8600 Westpark St #114 Houston TX 77063	124.49

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

-- 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 ($)
11/01/2004	Otto's BarBQ 5502 Memorial Houston TX 77007	9.61

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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

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 report: 12/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/30/2004	Pappas Brothers Steakhouse 5839 Westheimer Houston TX 77056	947.22

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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 ($)
11/30/2004	Party Boy 1515 Studemont St Houston TX 77007	37.91

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Office 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 ($)
12/16/2004	Pizzini's Italian Restaurant 927 Mercury Houston TX 77029	3918.75

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

-- 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 ($)
10/26/2004	Red Lion Pub 2316 S Shepard Houston TX 77019	35.73

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

-- 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 Total pages report: 13/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/23/2004	Riviera Grill 1117 Prairie Houston TX 77002	84.25

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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 ($)
11/23/2004	Riviera Grill 1117 Prairie Houston TX 77002	263.61

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

** 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 ($)
11/24/2004	Roberta Lloyd 1115 Congress 2nd Floor Houston TX 77002	500.00

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

** 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 ($)
10/29/2004	SBC P.O. Box 1550 Houston TX 77097	818.96

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Phone

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTIONGUIDE explains how to complete this form.

1 Total pages report: 14/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/10/2004	SBC P.O. Box 1550 Houston TX 77097	133.35

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Phones

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 ($)
12/10/2004	Saltgrass 20090 Hwy 59N Humble TX 77338	104.73

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

-- 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 ($)
11/11/2004	Spec's 2410 Smith St Houston TX 77006	99.23

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Other

-- 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 ($)
11/13/2004	Spec's 2410 Smith St Houston TX 77006	330.03

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTIONGUIDE explains how to complete this form.

1 Total pages report: 15/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/03/2004	St Pete's Dancing Marlin 300 Main Houston TX 77002	887.13

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Staff Appreciation

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 ($)
11/05/2004	Steak And Ale 19707 Hwy 59N Humble TX 77338	144.74

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

-- 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 ($)
12/03/2004	Steak And Ale 19707 Hwy 59N Humble TX 77338	130.41

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

-- 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 ($)
12/10/2004	US Court Of Appeals 5th Circuit 600 Camp St New Orleans LA 70130-3425	25.00

Purpose of expenditure (See instructions regarding type of information required.)
Office Holder:Other

-- 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 report: 16/16

2 FILER NAME
Friends of Michael Stafford

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/30/2004	US Postmaster Greenbriar Station Houston TX 77098	131.35

8 Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact

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