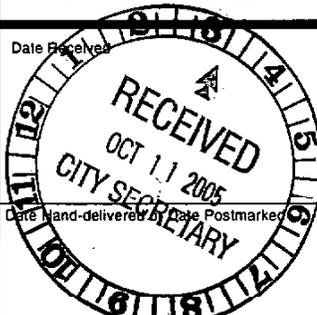


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<p><b>The C/OH INSTRUCTION GUIDE explains how to complete this form.</b></p>		<p><b>1 ACCOUNT #</b> (Ethics Commission filers)</p>	<p><b>2 Total pages filed:</b></p>
<p><b>3 CANDIDATE / OFFICEHOLDER NAME</b></p>	<p>MS / MRS / MR NICKNAME <i>Mrs. Pam</i></p>	<p>FIRST LAST <i>Pamela Holm</i></p>	<p>MI SUFFIX <i>N.</i></p>
<p><b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address</p>	<p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>5773 Woodway Dr, PMB 293 Houston, TX 77057</i></p>		
<p><b>5 CANDIDATE / OFFICEHOLDER PHONE</b></p>	<p>AREA CODE PHONE NUMBER EXTENSION <i>(713) 621-4328</i></p>		
<p><b>6 CAMPAIGN TREASURER NAME</b></p>	<p>MS / MRS / MR NICKNAME <i>Mrs.</i></p>	<p>FIRST LAST <i>Penny Butler</i></p>	<p>MI SUFFIX</p>
<p><b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>5773 Woodway, PMB 293, Houston, TX 77057</i></p>		
<p><b>8 CAMPAIGN TREASURER PHONE</b></p>	<p>AREA CODE PHONE NUMBER EXTENSION <i>(713) 621-4328</i></p>		
<p><b>9 REPORT TYPE</b></p>	<p> <input type="checkbox"/> January 15    <input checked="" 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 type="checkbox"/> 8th day before election    <input type="checkbox"/> Exceeded \$500 limit    <input type="checkbox"/> Final report (Attach C/OH - FR)                 </p>		
<p><b>10 PERIOD COVERED</b></p>	<p>Month Day Year    THROUGH    Month Day Year <i>7 / 1 / 05    9 / 29 / 05</i></p>		
<p><b>11 ELECTION</b></p>	<p>ELECTION DATE Month Day Year <i>11 / 8 / 05</i></p>	<p>ELECTION TYPE <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special</p>	
<p><b>12 OFFICE</b></p>	<p>OFFICE HELD (if any) <i>Houston City Council, Dist G</i></p>	<p><b>13 OFFICE SOUGHT (if known)</b> <i>Houston City Council, Dist G</i></p>	
<p><b>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b></p>	<p><b>** 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. **</b></p> <p>Name</p> <p>Address / PO Box; Apt. / Suite #; City; State; Zip Code</p> <p><input type="checkbox"/> additional pages</p>		

OFFICE USE ONLY



Date Received: \_\_\_\_\_

Date Hand-delivered by: \_\_\_\_\_ Date Postmarked: \_\_\_\_\_

Receipt # \_\_\_\_\_ Amount \_\_\_\_\_

Date Processed \_\_\_\_\_

Date Imaged \_\_\_\_\_

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME

*Pam Holm*

16 ACCOUNT # (Ethics Commission File)

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

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

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

\$

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

\$ 21,550.00

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 34,379.29

CONTRIBUTION BALANCE

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

\$ 244,009.58

OUTSTANDING LOAN TOTALS

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

\$

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Pam Holm*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Pam Holm, this the 11<sup>th</sup> day of October, 2008, to certify which, witness my hand and seal of office.

*Troy D. Lemon*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 1 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-1-2005	Full name of contributor out of state PAC ID# _____ Jim McBride	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-6-2005	Full name of contributor out of state PAC ID# _____ Houston Police Officers' Union PAC	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77007		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-6-2005	Full name of contributor out of state PAC ID# _____ D. Ferguson McNiel	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) Attorney		Employer (See Instructions)	

Date 7-6-2005	Full name of contributor out of state PAC ID# _____ Emily Crosswell	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-7-2005	Full name of contributor out of state PAC ID# _____ Lewis Ball	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions) Consultant		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 2 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Sally Meadows	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77019		
Principal occupation Job title (See Instructions) N/A		Employer (See Instructions) N/A	

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Mrs. Thomas R. Kelsey	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) N/A		Employer (See Instructions)	

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Reece B. Anderson	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions) Retired		Employer (See Instructions)	

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Carolyn C. Light	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77024		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Wm. James Miller	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) Developer		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 3 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-21-2005	Full name of contributor out of state PAC ID# _____ Travis Broesche	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77005		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Michael S. Hays	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77002		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ William L. Brown	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77081		
Principal occupation Job title (See Instructions) Development		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Lan Bentsen	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) Executive		Employer (See Instructions) Frontera Resources	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Randall Sorrels	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77002		
Principal occupation Job title (See Instructions) Attorney		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 4 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Richard Hightower	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Scott Shaeffer	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ David T. Harvin	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Pamela Kelley	Amount of contribution (\$) \$25.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77024		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Mary Henderson	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77005-3443		
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.	Total pages this Schedule A: pg 5 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Carol Gartsman	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Linda Walker	Amount of contribution (\$) \$125.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77005		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Bob Walker	Amount of contribution (\$) \$125.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77005		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Michael B. Good	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77006		
Principal occupation Job title (See Instructions) Real estate broker		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Eliza Duncan	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77024		
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.	Total pages this Schedule A: pg 6 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Dan M. Moody, Jr.	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77098		
Principal occupation Job title (See Instructions) Real estate		Employer (See Instructions) Moody Ramin	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Betty Key	Amount of contribution (\$) \$25.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77098		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Robert A. Seale	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77002		
Principal occupation Job title (See Instructions) Attorney		Employer (See Instructions) Liskow & Lewis PC	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Garnet Coleman Campaign	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77288-8140		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Jack S. Blanton, Sr.	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77098		
Principal occupation Job title (See Instructions) Investments		Employer (See Instructions) Eddy Refining Co.	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 7 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 7-29-2005	Full name of contributor out of state PAC ID# _____ Anne D. Moriniere	Amount of contribution (\$)  \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) Adminstrative		Employer (See Instructions) Park People	

Date 8-9-2005	Full name of contributor out of state PAC ID# _____ Susan C. Young	Amount of contribution (\$)  \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77098		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 8-12-2005	Full name of contributor out of state PAC ID# _____ Joel Reicheck	Amount of contribution (\$)  \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77007		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 8-12-2005	Full name of contributor out of state PAC ID# _____ Allyson Cook	Amount of contribution (\$)  \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77027		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 8-12-2005	Full name of contributor out of state PAC ID# _____ Linda Allison	Amount of contribution (\$)  \$200.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77019		
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.	Total pages this Schedule A: pg 8 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 8-12-2005	Full name of contributor out of state PAC ID# _____ David Zarr	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions) Real Estate		Employer (See Instructions)	

Date 8-12-2005	Full name of contributor out of state PAC ID# _____ Chris Pappas	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77253		
Principal occupation Job title (See Instructions) Partner		Employer (See Instructions) Pappas Restaurants	

Date 8-24-2005	Full name of contributor out of state PAC ID# _____ Elizabeth W. Kidd	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77019		
Principal occupation Job title (See Instructions) Retired		Employer (See Instructions)	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ CDM PAC	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77027		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Elouise Jones	Amount of contribution (\$) \$300.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77007		
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.	Total pages this Schedule A: pg 9 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Christian N. Seger	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77027		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Jerry Brady	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77291-1092		
Principal occupation Job title (See Instructions) President		Employer (See Instructions) Liberty Cab	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Rudy Bruhns	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77009		
Principal occupation Job title (See Instructions) Executive V.P. - Administration		Employer (See Instructions) Texas Taxi, Inc.	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Kurt Baerenstecher	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77077		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-8-2005	Full name of contributor out of state PAC ID# _____ Jim Russ	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77042		
Principal occupation Job title (See Instructions) Principal		Employer (See Instructions) Edminster, Hinshaw, Russ & Associates, Inc.	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 10 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 9-12-2005	Full name of contributor out of state PAC ID# _____ Reginald Hirsch	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Mary Watt	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ HouCon PAC	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77292-0843		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ BAC-PAC	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77057		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Jack S. Blanton, Jr.	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77098		
Principal occupation Job title (See Instructions) Investments		Employer (See Instructions) Eddy Refining Co.	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.	Total pages this Schedule A: pg 11 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Charles B. Wolfe	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77027		
Principal occupation Job title (See Instructions) Attorney		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Barton Bentley	Amount of contribution (\$) \$200.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions) Attorney		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ John Payne	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77056		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Allen Boone Humphries Robinson, LLP	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77027		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

Date 9-29-2005	Full name of contributor out of state PAC ID# _____ Sue Price	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77063		
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.	Total pages this Schedule A: pg 12 of 12
FILER NAME: Pam Holm	ACCOUNT # (Ethics Commission filers)

Date	Full name of contributor out of state PAC ID# _____	Amount of contribution (\$)	In-kind contribution description (if available)
9-29-2005	Jeffrey S. Davis	\$50.00	
	Contributor address; City, state, zip code [REDACTED] Houston, TX 77024		
Principal occupation Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 1 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 7/1/2005	Payee name      Payee address Kolache Factory 2045 Westheimer Houston, TX 77098	Amount (\$) \$18.06
------------------	--	------------------------

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

Date 7/15/2005	Payee name      Payee address SWB 2525 North Loop W, #5 Houston, TX 77008	Amount (\$) \$24.95
-------------------	--	------------------------

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

Date 7/17/2005	Payee name      Payee address Lakewood Church 3700 Southwest Frwy Houston, TX 77027	Amount (\$) \$9.00
-------------------	--	-----------------------

Purpose of expenditure (See instructions regarding type of information required.) Meeting expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 7/19/2005	Payee name      Payee address Go to my PC 5385 Hollister Santa Barbara, CA 93111	Amount (\$) \$179.40
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Purpose of expenditure (See instructions regarding type of information required.) Computer services	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 7/20/2005	Payee name      Payee address Verizon Wireless POBox 105378 Atlanta, GA 30348	Amount (\$) \$154.95
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Purpose of expenditure (See instructions regarding type of information required.) telephone	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 2 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 7/24/2005	Payee name      Payee address Go to my PC 5385 Hollister Santa Barbara, CA 93111	Amount (\$) \$19.95
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Purpose of expenditure (See instructions regarding type of information required.) Computer services	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 7/25/2005	Payee name      Payee address Nordstrom 5192 Hidalgo Houston, TX 77056	Amount (\$) \$42.11
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Purpose of expenditure (See instructions regarding type of information required.) Gift - constituent	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 7/27/2005	Payee name      Payee address Central Market 3815 Westheimer Houston, TX 77027	Amount (\$) \$155.40
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Purpose of expenditure (See instructions regarding type of information required.) Meeting expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/1/2005	Payee name      Payee address Women's Political Forum C/O 1100 Louisiana Houston, TX 77002	Amount (\$) \$30.00
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Purpose of expenditure (See instructions regarding type of information required.) Meeting expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/1/2005	Payee name      Payee address Public Storage 6336 Fairdale Houston, TX 77057	Amount (\$) \$81.00
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Purpose of expenditure (See instructions regarding type of information required.) Storage space	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 3 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 8/7/2005	Payee name      Payee address Hudson News Atlanta Airport Concourse Atlanta, GA      N/A	Amount (\$) \$15.36
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Purpose of expenditure (See instructions regarding type of information required.) Meeting expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/10/2005	Payee name      Payee address Woodfill for Chairman Campaign PO Box 2606 Houston, TX 77252	Amount (\$) \$50.00
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Purpose of expenditure (See instructions regarding type of information required.) Contribution	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/11/2005	Payee name      Payee address Jewish Herald Voice 3403 Audley Houston, TX 77098	Amount (\$) \$390.00
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Purpose of expenditure (See instructions regarding type of information required.) Advertisement	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/12/2005	Payee name      Payee address 1-800-Flowers 1-800-Flowers.com N/A      N/A	Amount (\$) \$55.19
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Purpose of expenditure (See instructions regarding type of information required.) Flowers - constituent	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/14/2005	Payee name      Payee address K's Travel Center 1520 IH 35 Bellmead, TX 76705	Amount (\$) \$52.50
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Purpose of expenditure (See instructions regarding type of information required.) Travel expense	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 4 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 8/15/2005	Payee name      Payee address SWB 2525 North Loop W, #5 Houston, TX 77008	Amount (\$) \$24.95
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Purpose of expenditure (See instructions regarding type of information required.) Web hosting	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/15/2005	Payee name      Payee address Verizon Wireless POBox 105378 Atlanta, GA 30348	Amount (\$) \$160.13
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Purpose of expenditure (See instructions regarding type of information required.) telephone	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/17/2005	Payee name      Payee address Daughters of Liberty Republican Women c/o 6131 Chevy Chase Houston, TX 77057	Amount (\$) \$100.00
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Purpose of expenditure (See instructions regarding type of information required.) Advertisement	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/17/2005	Payee name      Payee address 1-800-Flowers 1-800-Flowers.com N/A      N/A	Amount (\$) \$76.84
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Purpose of expenditure (See instructions regarding type of information required.) Flowers - constituent	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/22/2005	Payee name      Payee address City of Houston Municipal Campaign 900 Bagby Street Houston, TX 77002	Amount (\$) \$30.00
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Purpose of expenditure (See instructions regarding type of information required.) Contribution	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 5 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 8/22/2005	Payee name      Payee address City of Houston 900 Bagby Street Houston, TX 77052	Amount (\$) \$505.00
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Purpose of expenditure (See instructions regarding type of information required.) Filing fee	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/22/2005	Payee name      Payee address Office Max 1576 W. Gray Houston, TX 77019	Amount (\$) \$139.55
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Purpose of expenditure (See instructions regarding type of information required.) Office supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/22/2005	Payee name      Payee address USPS c/o 2299 White Street Houston, TX 77007	Amount (\$) \$66.60
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Purpose of expenditure (See instructions regarding type of information required.) Stamps	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/23/2005	Payee name      Payee address Abbotts Mailhouse 707 W/ 43rd, Ste. 101 Houston, TX 77092	Amount (\$) \$521.42
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Purpose of expenditure (See instructions regarding type of information required.) Printing and postage	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/24/2005	Payee name      Payee address Go To My PC 5385 Hollister Santa Barbara, CA 93111	Amount (\$) \$19.95
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Purpose of expenditure (See instructions regarding type of information required.) Computer services	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 6 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 8/25/2005	Payee name      Payee address Memorial Park Conservancy 1001 East Memorial Loop Houston, TX 77007	Amount (\$) \$250.00
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Purpose of expenditure (See instructions regarding type of information required.) Contribution	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/28/2005	Payee name      Payee address Office Depot 6711 61st Street Galveston, TX 77551	Amount (\$) \$67.52
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Purpose of expenditure (See instructions regarding type of information required.) Office supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/28/2005	Payee name      Payee address Walmart Supercenter 6702 Seawall Blvd Galveston, TX 77551	Amount (\$) \$155.57
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Purpose of expenditure (See instructions regarding type of information required.) Office supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/29/2005	Payee name      Payee address Target 4323 San Felipe Houston, TX 77027	Amount (\$) \$162.86
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Purpose of expenditure (See instructions regarding type of information required.) Office supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 8/31/2005	Payee name      Payee address 99Cents Store 2900 Westheimer Houston, TX 77027	Amount (\$) \$42.91
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Purpose of expenditure (See instructions regarding type of information required.) Supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 7 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 9/1/2005	Payee name      Payee address Public Storage 6336 Fairdale Houston, TX 77057	Amount (\$) \$81.00
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Purpose of expenditure (See instructions regarding type of information required.) Storage space	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/1/2005	Payee name      Payee address Whitney Bowles 616 Memorial Heights, #11105 Houston, TX 77007	Amount (\$) \$1,000.00
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Purpose of expenditure (See instructions regarding type of information required.) Campaign consulting	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/1/2005	Payee name      Payee address Walden and Associates 55 Waugh, Suite 515 Houston, TX 77007	Amount (\$) \$4,500.00
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Purpose of expenditure (See instructions regarding type of information required.) Campaign consulting	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/3/2005	Payee name      Payee address Southwest Airlines POB 36647-1CR Dallas, TX 75235	Amount (\$) \$154.00
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Purpose of expenditure (See instructions regarding type of information required.) Travel expense	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/6/2005	Payee name      Payee address Alonti One Shell Plaza Houston, TX 77002	Amount (\$) \$48.00
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Purpose of expenditure (See instructions regarding type of information required.) Meeting expenditure	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 8 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date	Payee name      Payee address	Amount (\$)
9/7/2005	Ouisie's Table 3939 San Felipe Houston, TX 77027	\$2,621.04

Purpose of expenditure (See instructions regarding type of information required.) Campaign reception expenses	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date	Payee name      Payee address	Amount (\$)
9/8/2005	Walden and Associates 55 Waugh, Suite 515 Houston, TX 77007	\$10,000.00

Purpose of expenditure (See instructions regarding type of information required.) Campaign consulting	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date	Payee name      Payee address	Amount (\$)
9/8/2005	Leedy Graphics PO Box 680826 Houston, TX 77268	\$517.44

Purpose of expenditure (See instructions regarding type of information required.) Printing	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date	Payee name      Payee address	Amount (\$)
9/8/2005	Kight Printing 5750 Bintliff, Ste. 202 Houston, TX 77036	\$279.83

Purpose of expenditure (See instructions regarding type of information required.) Printing	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date	Payee name      Payee address	Amount (\$)
9/9/2005	Peter Boyle PO Box 667247 Houston, TX 77007	\$437.25

Purpose of expenditure (See instructions regarding type of information required.) Graphic design	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 9 of 10
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FILER NAME: <b>Pam Holm</b>	ACCOUNT #: (Ethics Commission filers)
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Date <b>9/10/2005</b>	Payee name      Payee address <b>Angela Young 1115 Avenue H Galveston, TX 77550</b>	Amount (\$) <b>\$87.08</b>
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Purpose of expenditure (See instructions regarding type of information required.) <b>Reimbursement for supplies</b>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date <b>9/13/2005</b>	Payee name      Payee address <b>Samantha Munding 13734 Kingside Houston, TX 77079</b>	Amount (\$) <b>\$200.00</b>
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Purpose of expenditure (See instructions regarding type of information required.) <b>Reimbursement for supplies</b>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date <b>9/15/2005</b>	Payee name      Payee address <b>Houston Parks Board 2001 Kirby #814 Houston, TX 77019</b>	Amount (\$) <b>\$4,500.00</b>
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Purpose of expenditure (See instructions regarding type of information required.) <b>Contribution</b>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date <b>9/15/2005</b>	Payee name      Payee address <b>SWB 2525 North Loop W. #5 Houston, TX 77008</b>	Amount (\$) <b>\$24.95</b>
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Purpose of expenditure (See instructions regarding type of information required.) <b>Web hosting</b>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date <b>9/15/2005</b>	Payee name      Payee address <b>Verizon Wireless POBox 105378 Atlanta, GA 30348</b>	Amount (\$) <b>\$69.70</b>
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Purpose of expenditure (See instructions regarding type of information required.) <b>Campaign phone</b>	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10 of 10
FILER NAME: Pam Holm	ACCOUNT #: (Ethics Commission filers)

Date 9/21/2005	Payee name      Payee address Walgreen's 5200 Westheimer Houston, TX 77056	Amount (\$) \$156.88
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Purpose of expenditure (See instructions regarding type of information required.) Supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/24/2005	Payee name      Payee address Go To My PC 5385 Hollister Santa Barbara, CA 93111	Amount (\$) \$19.95
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Purpose of expenditure (See instructions regarding type of information required.) Computer services	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/29/2005	Payee name      Payee address Whitney Bowles 616 Memorial Heights, #11105 Houston, TX 77007	Amount (\$) \$6,000.00
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Purpose of expenditure (See instructions regarding type of information required.) Campaign consulting	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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Date 9/29/2005	Payee name      Payee address Public Storage 6336 Fairdale Houston, TX 77057	Amount (\$) \$81.00
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Purpose of expenditure (See instructions regarding type of information required.) Storage space	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought / held
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