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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission files)

2 Total pages filed: 9

OFFICE USE ONLY
Date Received
RECEIVED OCT 27 2005 CITY SECRETARY
Date Hand Delivered or Date Postmarked
Receipt #
Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MR
FIRST: Charles
MI: A
NICKNAME
LAST: Ingram
SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address
ADDRESS / PO BOX: P.O. Box 92492
APT / SUITE #:
CITY: Houston
STATE: Tx
ZIP CODE: 77292

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (713)
PHONE NUMBER: 471-7689
EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MRS
FIRST: Carlene
MI: Wright
NICKNAME
LAST: Ingram
SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 5503 Mountwood
APT / SUITE #:
CITY: Hou
STATE: Tex
ZIP CODE: 77091

8 CAMPAIGN TREASURER PHONE
AREA CODE: (713)
PHONE NUMBER: 851 6773
EXTENSION

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

10 PERIOD COVERED
Month Day Year: 10 / 5 / 05 THROUGH Month Day Year: 10/31/2005

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

12 OFFICE
OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): City Council District "B"

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **
Name
Address / PO Box: Apt. / Suite #: City: State: Zip Code
☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

•• This box is for notice of political expenditures by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ••

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ —
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1870.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ —
	4. **TOTAL POLITICAL EXPENDITURES**	$ 1714.47
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 981.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ —

19 AFFIDAVIT

JODY VIZENA
My Commission Expires
May 19, 2009

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.

Charles A. Ingram
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Charles A. Ingram, this the 27th day of October, 20 05, to certify which, witness my hand and seal of office.

Jody Vizena	Jody Vizena	Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 9

2 FILER NAME: Charles A. Ingram

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/8/05	Monica Sandoval [redacted] Houston, Texas 77008	$20.00	Reception

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/05	Allen + Dorothy Parker [redacted] Houston, Texas 77088	$50.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/05	Irene Landa [redacted] Houston, Texas 77023	$50.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/05	Ruby + Melvin Mosley [redacted] Houston, Texas 77088	$25.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/05	Jewell Houston [redacted] Houston, Texas 77088	$25.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 9

2 FILER NAME: Charles A Ingram

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address: City: State: Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
10/8/05	Beatrice Coleman [redacted] Houston, Texas 77088	$50.00	Reception		
10/8/05	Queen E. Martin [redacted] Houston, Texas 77091	$100.00	Reception		
10/8/05	Ada F. Jones [redacted] Houston, Texas 77088	$100.00	Reception		
10/8/05	Charles & Avanell Demart [redacted] Cypress Texas 77429	$100.00	Reception		
10/8/05	David & Bertha Taylor [redacted] Houston Texas 77022	$100.00	Reception		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A: 9

2 FILER NAME: Charles A Ingram

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/8/05	Ben + Janice Mask [redacted] Houston, Texas 77091	$100.00	Reception

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/05	Olive Oconnor [redacted] Houston, Texas 77006	$500.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/05	Patsy Howard [redacted] Sugarland Texas 77084	$25.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/05	Lashula Cotton [redacted] Houston, Texas 77088	$5.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/05	Jack Lee [redacted] Houston, Texas 77098-9063	$20.00	Reception

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A: 9

2 FILER NAME: Charles A. Ingram

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/16/05	KSilas Investments [redacted] Houston, Texas 77088	$100.00	Reception

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

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/05	Mr. Brewster [redacted] Houston, Texas 77088	$100.00	Reception

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

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/05	Gloria Powell [redacted] Houston, Texas 77091	$25.00	Reception

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

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/05	Elnita Sears [redacted] Houston, Texas 77088	$100.00	Reception

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

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/05	Jerry Williams [redacted] Houston, Texas 77091	$100.00	Reception

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 9

2 FILER NAME: Charles A Ingram

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/24/05	Dennystene Johnson 6 Contributor address; City; State; Zip Code [redacted] Houston, Texas 77021	$25.00	Reception

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/25/05	Chris Wright Contributor address; City; State; Zip Code [redacted] Houston, Texas 77095	$50.00	Reception

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

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

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

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

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

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 9

2 FILER NAME: Charles A. Ingram

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/5/05	Academy Awards 4102 Fannin Houston, Texas 77004	116.91

8 Purpose of payment (See instructions regarding type of information required.): Campaign T Shirts

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 ($)
10/5/05	Academy Awards 4102 Fannin Houston, Texas 77004	129.90

Purpose of payment (See instructions regarding type of information required.): Campaign T. Shirts

•• 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 ($)
10/7/05	African American News & Issues 6130 Wheatley St Houston, Texas 77091-3947	500.00

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

•• 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 ($)
10/14/05	Home Depot 999 W North Loop Houston, Texas 77008	61.66

Purpose of payment (See instructions regarding type of information required.): Wood stakes for yard signs

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 1

2 FILER NAME: Charles A Ingram

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/17/05	Clear Channel Outdoor Houston, Texas	406.00

8 Purpose of payment (See instructions regarding type of information required.): Campaign Bill Boards

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 ($)
10/24	La Tremenda Klat 1010 Am North Loop Houston, Texas 77008	500.00

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

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

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

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

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

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

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED