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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 28

OFFICE USE ONLY
Date Received
Date Hand-delivered or Date Postmarked
Receipt # | Amount
Date Processed
Date Imaged

RECEIVED NOV 07 2005 CITY SECRETARY

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr.	FIRST: Jarvis	MI: D	NICKNAME	LAST: Johnson
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX: 3400 Liberty Rd	APT / SUITE #:	CITY: Houston	STATE: TX	ZIP CODE: 77026
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (713)	PHONE NUMBER: 957-5113	EXTENSION:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs.	FIRST: Velika	MI: J	NICKNAME	LAST: Hines
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 3400 Liberty Rd	APT / SUITE #:	CITY: Houston	STATE: TX	ZIP CODE: 77026
8 CAMPAIGN TREASURER PHONE	AREA CODE: (713)	PHONE NUMBER: 957-5113	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 / 9 / 2005 THROUGH Month Day Year 11 / 07 / 2005

11 ELECTION: ELECTION DATE Month Day Year 11 / 8 / 2005
ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE: OFFICE HELD (if any): NA

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

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

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)	$ 6,384.84
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 22,086.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 20,298.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

19 AFFIDAVIT

ALETHEA A. RENY
Notary Public, State of Texas
My Commission Expires 1/15/2007

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Jarvis Johnson, this the 31 day of Oct, 20 05, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Alethea Reny	Alethea Reny	Notary

Printed on recycled paper

Revised 11/05/2003

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A.

2 FILER NAME: Jarris D Johnson

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)
10/20/05	Oswald Scott [redacted] Houston, TX 77077	100.00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/25/05	Urban Insurance Managers [redacted] Houston, TX 77051	250 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/05	Shawn Simmons [redacted] Houston, TX 77270	100 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/05	Krista Levi [redacted] Houston, TX 77091	100 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/12/05	Debra Hardy [redacted] Houston, TX 77066	50 00	

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME
Jarvis D. Johnson

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)
10/22/05	Ennis Lindley [redacted] Houston, TX 77091	50 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/10/05	Chris Richardson [redacted] Houston, TX 77057	5,000 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/15/05	Keith V. Branch [redacted] Houston, TX 77219	100 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/05	Charles Gray [redacted] Philadelphia, PA 19131	100 00	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/14/05	Brian J Stevens [redacted] Houston, TX 77071	125 00	

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT (Ethics Commission use)

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	Petty D' Hunter [redacted] Abilene, Tx 79601	50 00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/24/05	Culinary Creations [redacted] Houston, Tx 77004	359.84	provided lunch for poll workers

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME
Jarris D Johnson

3 ACCOUNT # (Ethics Commission use)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/28/05	Brittani Barriere	75.00

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

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 ($)
10/28/05	Denise Rylander	75.00

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

** 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 ($)
10/28/05	Teanna Harris	75.00

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

** 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 ($)
10/28/05	Christina Gibson	75.00

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages (schedule F)

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ell) (Expires on file)

4 Date	5 Payee name / 6 Payee address: City; State; Zip Code	7 Amount ($)
10/20/05	U.S. Postal Service Houston, TX 77026	74.00

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	Payee name / Payee address: City; State; Zip Code	Amount ($)
10/20/05	Dollar Tree Houston, TX	19.49

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

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 ($)
10/22/05	Valero 8003 Howard Dr. Houston, TX 770	20.00

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 ($)
10/26/05	Rodrick Joyner	75.00

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

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

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11/03/2003

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/29/05	Marguita Henry	40.00

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

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 ($)
10/28/05	Danielle Lewis	80.00

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

•• 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 ($)
10/28/05	Rachel Whitehead	60.00

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

•• 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 ($)
10/28/05	Krystal Watson	20.00

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

•• 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 page consolidated

2 FILER NAME
Jarris D Johnson

3 ACCOUNT (Office Use Only)

4 Date	5 Payee name / 6 Payee address: City; State; Zip Code	7 Amount ($)
10/28/05	Richard Bailey 7830 Flintridge 77028	75.00

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

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 ($)
10/28/05	Elizynette Askew 7906 Darlington Houston, TX 77028	75.00

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

** 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 ($)
10/12/05	Shell 2819 Quitman Houston, TX 77026	30.00

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

** 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	Jet Stop	85.00

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Office Use Only)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/15/05	Mobil 9421 Cullen Houston, TX 77051	60.00

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

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 ($)
10/16/05	Mobil 9421 Cullen Houston, TX 77051	40.00

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

** 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 ($)
10/11/05	U.S. Postal Service Barbara Jordan Main Houston, TX 77201	50.00

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	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/19/05	Office Max 290 Meyerland Plaza Houston, TX 77096	16.63

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 Fax: 825-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME
Jarvis O Johnson

3 ADDRESS (Ethics Commission)

4 Date: 10/20/05

5 Payee name: U.S. Postal Service

6 Payee address: City; State; Zip Code
Houston, TX 77026

7 Amount ($): 74.00

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: 10/19/05

Payee name: Fiesta

Payee address: City; State; Zip Code
5800 Lyons
Houston, TX

Amount ($): 20.16

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

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

Date: 10/20/05

Payee name: Shell

Payee address: City; State; Zip Code
11203 Northwest Freeway
Houston, TX 77

Amount ($): 200.00

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

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

Date: 10/20/05

Payee name: Shell

Payee address: City; State; Zip Code
4540 W. Little York
Houston, TX 77091

Amount ($): 55.00

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages (Schedule F)

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT (Ethics Commission)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	Amount ($)
10/24/05	McDonalds 7518 N Freeway Houston, Tx 77037	$13.50

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/25/05	Fed Ex Kinkos 2200 Southwest Frwy Houston, Tx 77098	$3.23

Purpose of payment (See instructions regarding type of information required.): Copies for Pollworkers

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 ($)
10/26/05	Fedex Kinkos 2200 SW Freeway	$5.00

Purpose of payment (See instructions regarding type of information required.): Copies for Poll Workers

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 ($)
10/26/05	Infovine P.O. Box 2706 Houston, Tx 77252	2,673.74

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 (when filed)

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT (Ethics Commission Filer)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	Amount ($)
10/22/05	Sun mart 119 7102 N Frwy	$6.13

8 Purpose of payment (See instructions regarding type of information required.): Rally → 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 ($)
10/23/05	Jet Stop	$60.00

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

** 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 ($)
10/24/05	Popeyes	$12.63

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/24/05	Lockwood Shell 5722 Lockwood Houston, Tx. 77026	$10.00

Purpose of payment (See instructions regarding type of information required.): Gas for Vans

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Jarvis O Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
10/25/05	KCOH	commercials	1,634.00	☐
10/25/05	John Witson 8649 Belle Park Houston, TX 77099	Telephone list	2,232.00	☐
10/26/05	Leroy Grambrel	BBQ Rally	400.00	☐
10/26/05	Deidre Raasheed 14211 Regg Houston, TX 77045	Campaign expenses	900.00	☐
10/26/05	Sam's	BBQ Rally	212.00	☐

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
10/10/05	U.S. Postal Service	Postage	6 00	☐
10/14/05	Office Depot	Stationary + packets	303 15	☐
10/10/05	Donna Burgers Liberty Rd Houston, TX 77026	Food for volunteers	430 00	☐
10/17/05	Richard Bailey 7830 Flintridge Houston, TX 77028	Block walk	35 00	☐
10/21/05	Denise Rylander	Block walk	35 00	☐

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
10/31/05	Sprint Print 10100 Clay Rd, Ste-C Houston, TX 77080	Signs, literature, posters, mailers	6,085.81	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/05	Jennifer McHenry 6006 Bacher Houston, TX 77028	150 00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Tammy Wiltz 950 N. Wayside # 1208 Houston, TX 77028.	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Christopher Telford 8026 Mitty St Houston, TX 77028	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Derrick Henderson 8022 Mitty St. Houston, TX 77028	150 00

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
Block walking	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/05	Lisa Scott 8033 Miley Houston, TX 77028	150.00

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

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 ($)
10/14/05	Patrina Witz 7373 N. Wayside # 2102 Houston, TX 77028	150.00

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

•• 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	Antoine Mack 6767 Bennington # 118 Houston, TX 77016	150.00

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

•• 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	Michele McHenry 6006 Bacher Houston, TX 77028	150.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/05	Cassandra Johnson 7957 Middle St. Houston, TX 77028	150 00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Phadra Houston 8033 Miley Houston, TX 77028	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Jermaine Mitchell 8033 Miley Houston, TX 77028	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Curtis Mitchell 8033 Miley Houston, TX 77028	150 00

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
Block walking	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/05	Alonzo Ross 8614 Candy Houston, TX 77029	150 00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Sabrina Lewis 3401 1/2 Liberty Rd #4 Houston, TX 77026	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Cynthia Gray 5314 Hershe #9 Houston, TX 77026	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/14/05	Michelle Parker 5302 Hershe #6 Houston, TX 77026	150 00

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
Block walking	

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/21/05	Lisa Scott 8033 Miley Houston, TX 77028	150.00

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

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 ($)
10/21/05	Patrina Witz 7373 N. Wayside #2102 Houston, TX 77028	150.00

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

•• 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 ($)
10/21/05	Antoine Mack 6767 Bennington #118 Houston, TX 77016	150.00

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

•• 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 ($)
10/21/05	Michele McHenry 6006 Becher Houston, TX 77028	150.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME: Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/21/05	Jennifer McHenry 6006 Bacher Houston, TX 77028	150.00

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

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 ($)
10/21/05	Tammy Wiltz 950 N. Wayside # 1208 Houston, TX 77028	150.00

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

•• 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 ($)
10/21/05	Christopher Telford 8026 Mitty St. Houston, TX 77028	150.00

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

•• 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 ($)
10/21/05	Kerrick Henderson 8022 Mitty St. Houston, TX 77028	150.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/21/05	Cassandra Johnson 7957 Middle St. Houston, TX 77028	150 00

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

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 ($)
10/21/05	Phadra Houston 8033 Miley Houston, TX 77028	150 00

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

•• 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 ($)
10/21/05	Jermaine Mitchell 8033 Miley Houston, TX 77028	150 00

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

•• 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 ($)
10/21/05	Curtis Mitchell 8033 Miley Houston, TX 77028	150 00

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

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

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SCHEDULE F

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1 Total pages Schedule F.

2 FILER NAME Jarris D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/21/05	Alonzo Ross 8614 Candy Houston, TX 77029	150 00

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

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 ($)
10/14/05	Marilyn Alonzo 2716 Campbell Houston, TX 77026	150 00

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

•• 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	Annie Johnson 2706 Quitman Houston, TX 77026	150 00

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

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

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

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/28/05	Jennifer McHenry 6006 Bacher Houston, TX 77028	150 00

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

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 ($)
10/28/05	Tammy Wiltz 950 N. Wayside # 1208 Houston, TX 77028	150 00

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

•• 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 ($)
10/28/05	Christopher Telford 8026 Mitty St. Houston, TX 77028	150 00

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

•• 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 ($)
10/28/05	Herrick Henderson 8022 Mitty St. Houston, TX 77028	150 00

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

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

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POLITICAL EXPENDITURES

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1 Total pages Schedule F:

2 FILER NAME
Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address: City: State: Zip Code	7 Amount ($)
10/28/05	Lisa Scott 8033 Mikey Houston, TX 77028	150.00

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

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 ($)
10/28/05	Patrina Witz 7373 N. Wayside #2102 Houston, TX 77028	150.00

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

** 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 ($)
10/28/05	Antoine Mack 10767 Bennington #118 Houston, TX 77016	150.00

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

** 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 ($)
10/28/05	Michele McHenry 6006 Bacher Houston, TX 77028	150.00

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

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

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Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/28/05	Cassandra Johnson 7957 Midale St. Houston, TX 77028	150 00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/28/05	Phadra Houston 8033 Miley Houston, TX 77028	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/28/05	Jermaine Mitchell 8033 Miley Houston, TX 77028	150 00

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
Block walking	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/28/05	Curtis Mitchell 8033 Miley Houston, TX 77028	150 00

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
Block walking	

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1 Total pages Schedule F:

2 FILER NAME Jarvis D Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/28/05	Alonzo Ross 8614 Candy Houston, TX 77029	150 00

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

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 ($)

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

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

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

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

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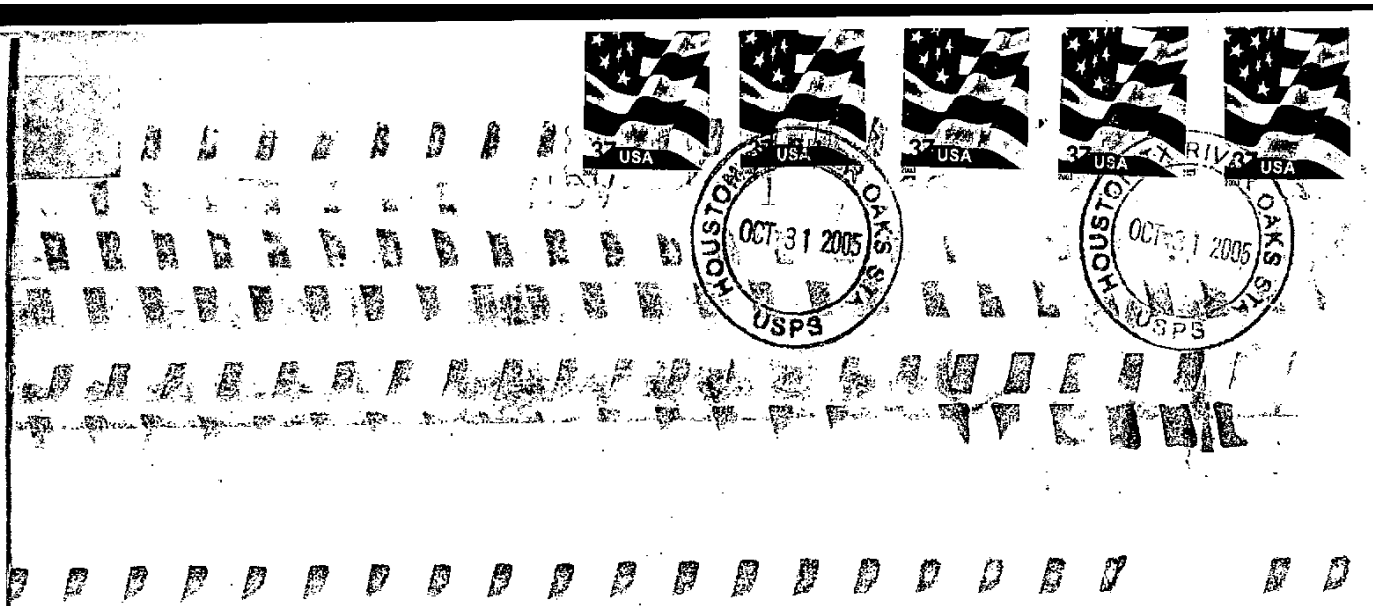

To: City Secretary=City of Houston
Attn Anna Russel
900 Bagby #101
Houston Tx. 77002