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): 00000003

2 PAGE #: 1 of 18

OFFICE USE ONLY

Date Received: RECEIVED JAN 17 2006 CITY SECRETARY

Date Hand-delivered or Date Postmarked:

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. FIRST: Ronald MI:

NICKNAME: LAST: Green SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

6524 San Felipe
PMB 517
Houston, TX 77057

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr. FIRST: Harry MI:

NICKNAME: LAST: Johnson SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

7670 Woodway, Ste. 110
Houston, TX 77063

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(713) 978-7701

9 REPORT TYPE

- [X] 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: 10/30/2005 THROUGH Month Day Year: 12/31/2005

11 ELECTION

ELECTION DATE: Month Day Year

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Houston City Council Pos. 4

13 OFFICE SOUGHT (if known):

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 Green, Ronald (Mr.)

16 ACCOUNT # (Ethics Commission filers) 00000003

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	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	$ 25.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 8,051.12
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 149.98
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 14,878.75
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 101,865.94
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

CHRISTOPHER MAYS
Notary Public, State of Texas
My Commission Expires
July 11, 2007

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ronald C. Green, this the 17th day of January, 2006, to certify which, witness my hand and seal of office.

Christopher Mays	Christopher Mays	Notary Public
Signature of officer administering oath	Print 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.

1 PAGE # Schedule: 1/3 Report: 3/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00000003

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)
11/09/2005	Alexander, Leslie [redacted] Boca Raton, FL 33432-2846	$1,000.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☒ out-of-state PAC(ID# C00011114) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/02/2005	American Federation of State, County, & Municipal Employees - AFSCME/AFL-CIO [redacted] Washington, DC 20036-5665	$276.12	Mail Services

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☒ out-of-state PAC(ID# C00011114) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/11/2005	American Federation of State, County, & Municipal Employees - AFSCME/AFL-CIO [redacted] Washington, DC 20036-5665	$1,000.00	

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)
12/15/2005	Bates & Coleman, P.C. [redacted] Houston, TX 77004	$500.00	

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)
12/15/2005	Brotherhood of Locomotive Engineers Texas State Le [redacted] Fort Worth, TX 76118-6372	$300.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/3 Report: 4/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00000003

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/09/2005	Green, Al 6 Contributor address; City; State; Zip Code [redacted] Houston, TX 77027	$500.00	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

Date	Full name of contributor ☒ out-of-state PAC(ID# C00128512)	Amount of contribution ($)	In-kind contribution description (if applicable)
12/15/2005	J.P. Morgan Chase & Co. State and Federal PAC Contributor address; City; State; Zip Code [redacted] New York, NY 10169-0005	$250.00	
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)
11/09/2005	Johnson, Marcia Contributor address; City; State; Zip Code [redacted] Houston, TX 77021-1714	$500.00	
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)
11/02/2005	King, Vivian Contributor address; City; State; Zip Code [redacted] Houston, TX 77004	$200.00	
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)
12/15/2005	Niazi, Zaki Contributor address; City; State; Zip Code [redacted] Sugar Land, TX 77479	$250.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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 PAGE # Schedule: 3/3 Report: 5/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00000003

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/15/2005	Nomani, Burhan 6 Contributor address; City; State; Zip Code [redacted] Houston, TX 77027-9300	$500.00	
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)
11/09/2005	P.O.W.E.R. P.A.C. Contributor address; City; State; Zip Code [redacted] Houston, TX 77005-2518	$1,900.00	
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)
12/15/2005	Reliant Energy PAC Contributor address; City; State; Zip Code [redacted] Houston, TX 77001	$750.00	
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)
11/09/2005	Smith, Prudence Contributor address; City; State; Zip Code [redacted] Houston, TX 77054-2020	$100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/13 Report: 6/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/07/2005	A. Philip Randolph Institute 815-16th Street NW Washington, DC 20006	$120.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/09/2005	A. Philip Randolph Institute 815-16th Street NW Washington, DC 20006	$200.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2005	Alief Community Associations P.O. Box 17122 Alief, TX 77411	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/08/2005	APC 10330 Hillcroft Houston, TX 77096	$75.98

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/13 Report: 7/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/09/2005	April Merit Foundation 1519 Ruth St Houston, TX 77004	$450.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/13/2005	Arnold, Rhonda 10918 Shawnbrook Dr. Houston, TX 77071	$80.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Brown, Chris 100 McGowan Unit A Houston, TX 77006	$80.04

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	City Slickers P.O. Box 1562 Houston, TX 77002	$100.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/13 Report: 8/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/09/2005	Concerned Citizens Coalition PO Box 451394 Houston, TX 77245	$150.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/03/2005	Conrad O Johnson Music & Fine Arts Fund 1320 Main St Houston, TX 77002	$330.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Creuzo Cuizine 4814 La Branch Street Houston, TX 77004	$439.60

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	D.R.E.M.E. Foundation 621 Chapala St. Suite D Santa Barbara, CA 93101	$250.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/13 Report: 9/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/11/2005	Fastsigns-Downtown 813 Dallas Houston, TX 77002	$112.50

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	Government Finance Officers Assoc. 1301 Pennsylvania Avenue, N.W., Suite 309 Washington, DC 20004	$135.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2005	HCCO PAC 2314 Wheeler Houston, TX 77004	$500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/15/2005	Houston 80/20 PAC 8300 Bender Rd. Humble, TX 77396	$65.00

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/13 Report: 10/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/28/2005	Houston Area Urban League - YP 1301 Texas Avenue Houston, TX 77002	$1,000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/07/2005	Houston Challengers 1475 West Gray, Suite 166 Houston, TX 77095	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/21/2005	Houston Livestock Show & Rodeo 8334 Fannin Street Reliant Center Houston, TX 77054	$500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2005	Houston Style Magazine 2646 South Loop West, Suite 270 Houston, TX 77054	$300.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/13 Report: 11/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/28/2005	I-10 Media 6300 Richmond Ave. Houston, TX 77057	$250.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	IB Visual Concepts 802 Bolster St. Baytown, TX 77520	$443.82

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	Jazz Education, Inc. 3303 S. Rice, Suite 107 Houston, TX 77054	$60.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/04/2005	KCOH Radio 5011 Almeda Houston, TX 77004	$530.00

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/13 Report: 12/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/19/2005	Levine, Burt 2646 South Loop West Ste 375 Houston, TX 77054	$400.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/21/2005	Media Production 7100 Regency Square Blvd # 275 Houston, TX 77036	$60.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Monarch Printing Company, Inc. 6605 McGrew Houston, TX 77087	$953.46

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Monarch Printing Company, Inc. 6605 McGrew Houston, TX 77087	$781.13

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

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

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 PAGE #
Schedule: 8/13 Report: 13/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/10/2005	Mt. Vernon United Methodist 1501 Jensen Dr Houston, TX 77020	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/21/2005	NEBS 10670 Northwest Fwy Houston, TX 77092	$90.62

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	P.P.H.S.E.T. PAC 3601 Fannin Street Houston, TX 77004	$150.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/22/2005	Predestined Events P.O. Box 1941 Houston, TX 77251	$500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/13 Report: 14/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/22/2005	SBC PO Box 650661 Dallas, TX 75265	$146.93

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/02/2005	Shell 3505 Gulf Freeway Houston, TX 77003	$75.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Shrine of the Black Madonna 5309 Martin L. King Blvd. Houston, TX 77021	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/03/2005	Southeast Coalition of Civic Clubs 4103 Madden Lane Houston, TX 77047	$250.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/13 Report: 15/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/08/2005	Sprint PCS P.O. Box 219718 Kansas City, MO 64121-9718	$283.52

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	St. John's Academy 2019 Crawford Houston, TX 77002	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	TEMAC Solutions 2016 Main Suite 111 Houston, TX 77002	$1,500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/09/2005	Texas Legislative Internship Program The Mickey Leland Center on World Hunger and Peace 3100 Cleburne Avenue Houston, TX 77004	$500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/13 Report: 16/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/28/2005	The Breakfast Klub 3711 Travis St. Houston, TX 77002	$376.17

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/05/2005	The Fountain of Praise 13535 South Post Oak Road Houston, TX 77045	$500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/07/2005	The Imani School 12401 South Post Oak Road Houston, TX 77045	$250.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/18/2005	The Outreach Program, Inc. PO Box 21068 Houston, TX 77226	$200.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/13 Report: 17/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/05/2005	Top Ladies of Distinction 7212 Carothers Houston, TX 77028	$125.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/21/2005	U.S. Postal Service 401 Franklin Houston, TX 77002	$560.00

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 ($)
11/02/2005	WAM Foundation 12401 S Post Oak Rd Houston, TX 77045	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	West Houston Assistance Ministries 10501 Meadowglen Lane Houston, TX 77042	$100.00

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/13 Report: 18/18

2 FILER NAME Green, Ronald (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000003

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/21/2005	Women Contractor's Association PO Box 130441 Houston, TX 77219	$100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/27/2005	Women Professionals In Government P.O. Box 1278 Houston, TX 77251	$55.00

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

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