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

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

See backside for instructions

1 ACCOUNT #

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr. FIRST: Chris MI:

NICKNAME LAST: Bell SUFFIX

OFFICE USE ONLY

Date Received

RECEIVED OCT 23 2001 CITY SECRETARY

Date Hand-delivered / Postmarked

Receipt # Account

Legal Totals

Date Processed

Date Imaged

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [x] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED

Month Day Year: 07/01/2001 THROUGH Month Day Year: 09/27/2001

6 EXPLANATION OF CORRECTION

Report date adjustment from 10/6/2001 to 9/27/2001 to reflect 40 days before the election instead of 30 days before the election.

7 AFFIDAVIT

YVONNE GREENBAUER
Notary Public, State of Texas
My Commission Expires 05-09-2005

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, under penalty of perjury, that I did not intend to violate a reporting requirement when I filed the original report.

Signature of Candidate or Officeholder

Sworn to and subscribed before me by Chris Bell this the 22nd day of October, 2001.

to certify which, witness my hand and seal of office.

Yvonne Greenbauer — Signature of officer administering oath

Yvonne Greenbauer — Printed name of officer administering oath

Notary — Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

(Revised 06/11/2000)

Printed on recycled paper

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 Filer)

2 Total pages filed:

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr. FIRST: Chris MI:

NICKNAME: LAST: Bell SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: PO Box 2405 APT / SUITE #: CITY: STATE: ZIP CODE: Houston, TX 77252

5 CAMPAIGN TREASURER NAME

TITLE: Mr. FIRST: Jeff MI:

NICKNAME: LAST: Steen SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 5643 Ella Lee Lane APT / SUITE #: CITY: STATE: ZIP CODE: Houston, TX 77056

7 CAMPAIGN TREASURER PHONE

AREA CODE: (281) PHONE NUMBER: 285-7172 EXTENSION:

8 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)

9 PERIOD COVERED

Month Day Year: 07 / 01 / 2001 THROUGH Month Day Year: 09 / 27 / 2001

10 ELECTION

ELECTION DATE Month Day Year: 11 / 06 / 2001

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Councilman, City of Houston

12 OFFICE SOUGHT (if known): Mayor, City of Houston

13 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

14 C/OH NAME: Mr. Chris Bell

15 ACCOUNT # (Ethics Commission Use)

16 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

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 3,057.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 109,203.97
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 791.57
	4. **TOTAL POLITICAL EXPENDITURES**	$ 423,532.52
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20____ __ , to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use) 0

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)
07/24/2001	Kent Adams [redacted] Sedona AZ 86326	250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/14/2001	Paula Adams [redacted] Houston TX 77024	1000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Sharon Adams [redacted] Houston TX 77019	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/05/2001	Shari Ajudani [redacted] Houston TX 77013	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Darren Alch [redacted] Houston TX 77005	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filer) 0

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)
09/05/2001	Sallie Alcorn	[redacted] Houston TX 77027	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/25/2001	Sallie Acorn	[redacted] Houston TX 77027	50.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Sissy Alcorn	[redacted] Houston TX 77027	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/01/2001	Randy Alexander	[redacted] Houston TX 77060	500.00	Headquarters Expenses

Principal occupation (Optional)
Employer (Optional)

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)
08/16/2001	Robert Allen	[redacted] Houston TX 77006	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

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)
09/21/2001	D'Anne Andersor [redacted] Houston TX 77057	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
08/28/2001	David Andrews [redacted] Houston TX 77024	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/10/2001	Steven Anton [redacted] Houston TX 77098-1808	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/21/2001	Lambert Arceneaux [redacted] Houston TX 77270	5000.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/01/2001	Brenda Arnett [redacted] Houstor TX 77006	892.92	Event Expenses

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Filer completes)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/01/2001	Brenda Arnett 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77006	324.00	Event Expenses
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/01/2001	Brenda Arnett Contributor address; City; State; Zip Code [redacted] Houston TX 77006	545.50	Event Expenses
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/18/2001	Elizabeth Arnold Contributor address; City; State; Zip Code [redacted] Houston TX 77019	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Nanette Ayres Contributor address; City; State; Zip Code [redacted] Houston TX 77027-5106	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/18/2001	Mary Babbitt Contributor address City; State; Zip Code [redacted] Spring TX 77389	150.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filers)
0

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)
07/03/2001	Mary Bain [redacted] Houston TX 77062	100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/13/2001	Baker Botts Amicus Fund [redacted] Houston TX 77002	5000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/24/2001	Marilyn Baker [redacted] Houston TX 77056	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/05/2001	John Bass [redacted] Houston TX 77019-5611	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/30/2001	Charles Bauer [redacted] Houston TX 77056	1000.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION Guide explains how to complete this form.

1 Total pages this report: 8/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filer) 0

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)
09/07/2001	Ruth Bauer [redacted] Houston TX 77056-0218	2500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/26/2001	Beirne,Maynard & Parsons,L.L.P. [redacted] Houston TX 77056	2628.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Janice Benys [redacted] Houston TX 77018	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/15/2001	Victor Bhati [redacted] Houston TX 77036	445.80	Office Supplies

Principal occupation (Optional) | Employer (Optional)

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)
09/24/2001	John Bonica [redacted] Houston TX 77005-3523	150.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission use): 0

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)
07/09/2001	David Boothe [redacted] Baytown TX 77521	1000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/05/2001	Thomas Bruner [redacted] Houston TX 77062-2100	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Thomas Burkett [redacted] Houston TX 77041	5000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/19/2001	Dan Bush [redacted] Houston TX 77041	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/13/2001	Christine Campbell [redacted] Houston TX 77027	50.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/103

2 FILER NAME: Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filer): 0

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)
07/18/2001	Christine Campbell [redacted] Houston TX 77027	25.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/27/2001	Gregory Catsinas [redacted] Houston TX 77057	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/15/2001	Scott Clearman [redacted] Houston TX 77002-2731	2000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/06/2001	Patrick Cohan [redacted] Houston TX 77027	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Samantha Connell [redacted] Houston TX 77057	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

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)
08/16/2001	David Corpus [redacted] Houston TX 77029	500.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
08/12/2001	Col Cottingham [redacted] Houston TX 77056	150.00	Headquarters Supplies

Principal occupation (Optional)
Employer (Optional)

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)
07/18/2001	Erwin Cottingham [redacted] Houston TX 77056	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/24/2001	Tirey Counts [redacted] Houston TX 77070	500.00	Event Expenses

Principal occupation (Optional)
Employer (Optional)

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)
08/09/2001	Jordan Cowman [redacted] Dallas TX 75201	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Name)
0

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)
07/01/2001	Lisa Curry	[redacted] Houston TX 77056	50.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/25/2001	Lisa Curry	[redacted] Houston TX 77056	25.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/21/2001	Charles Cusack	[redacted] Houston TX 77030	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/24/2001	Charles Dailey	[redacted] Houston TX 77024	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/18/2001	Becky Damone	[redacted] Houston TX 77057-1905	500.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 13/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Filer Correspondence)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2001	John Dao 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77007	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/24/2001	Sally Davies Contributor address; City; State; Zip Code [redacted] Houston TX 77057	1750.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/28/2001	Holly DeMoss Contributor address; City; State; Zip Code [redacted] Houston TX 77057	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2001	June Deadrick Contributor address; City; State; Zip Code [redacted] Houston TX 77027	358.64	Event Expenses
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	D. Dippel Contributor address; City; State; Zip Code [redacted] Cypress TX 77433	500.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
09/26/2001	Hank Dixon	[redacted] Houston TX 77027	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/06/2001	Robert Donnelly	[redacted] Houston TX 77019	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/05/2001	Patsy Doucette	[redacted] Houston TX 77061-1506	150.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Patsy Doucette	[redacted] Houston TX 77061-1506	50.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/16/2001	John Eckel	[redacted] Houston TX 77056	100.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
08/15/2001	John Flowers [redacted] Houston TX 770[illegible]9	200.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/03/2001	Cecil Fong [redacted] Houston TX 77071	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	C. Fordham [redacted] Houston TX 77056	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/28/2001	Michael Francisco [redacted] Houston TX 77024	150.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/25/2001	T. Friedkin [redacted] Houston TX 77210-4718	2500.00	

Principal occupation (Optional)
Employer (Optional)

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 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (If this Commission Form)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/25/2001	Paul Frison 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77056	100.00	

9 Principal occupation (Optional)

10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/18/2001	Lynn Garner Contributor address; City; State; Zip Code [redacted] Cypress TX 77429	2000.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/19/2001	Lynn Garner Contributor address; City; State; Zip Code [redacted] Cypress TX 77429	3000.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/12/2001	Jill Garrison Contributor address; City; State; Zip Code [redacted] Houston TX 77007	100.00	Headquarters Supplies

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/16/2001	Robin Gibbs Contributor address; City; State; Zip Code [redacted] Houston TX 77002	2000.00	

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

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)
09/27/2001	Larry Godeaux [redacted] Alvin TX 77511	500.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/27/2001	Rosalie Goldberg [redacted] Houston TX 77024	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/15/2001	Dean Graves [redacted] Houston TX 77004	2500.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/18/2001	Joseph Grealish [redacted] Houston TX 77056	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/12/2001	Lizabeth Green [redacted] Houston TX 77056-3324	300.00	Headquarter Supplies

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 18/103

2 FILER NAME
Mr Chris Bell

3 ACCOUNT # (Ethics Commission Nos)
0

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)
08/15/2001	Lizabeth Green	[redacted] Houston TX 77056-3324	50.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/27/2001	Lizabeth Green	[redacted] Houston TX 77056-3324	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/25/2001	Brad Greer	[redacted] Houston TX 77004	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/19/2001	Robert Greer	[redacted] Houston TX 77024	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Patricia Griffith	[redacted] Houston TX 77027	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS CIOH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 19/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use) 0

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)
09/24/2001	Grant Harpold [redacted] Houston TX 77002	500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
07/16/2001	Michael Harrison [redacted] Houston TX 77024	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/24/2001	Zafer Hashem [redacted] Houston TX 77008	1000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/05/2001	Timothy Hebert [redacted] Houston TX 77025-2519	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/17/2001	Peter Heckler [redacted] Houston TX 77007	250.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 20/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Files)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/19/2001	James Hill 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77098	1000.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	Cynthia Holland Contributor address; City; State; Zip Code [redacted] Houston TX 77005	1000.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/10/2001	Wayne Hollis Contributor address; City; State; Zip Code [redacted] Houston TX 77079	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/05/2001	Alison Howell Contributor address; City; State; Zip Code [redacted] Dallas TX 75225	250.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Darci Hubbard Contributor address; City; State; Zip Code [redacted] Houston TX 77079-3611	1000.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 21/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Fund)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/18/2001	David Huffstutler 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77030	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Jill Imhoff Contributor address; City; State; Zip Code [redacted] Houston TX 77056	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/23/2001	H.W. Jenckes Contributor address, City; State; Zip Code [redacted] Houston TX 77024	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Richard Jessup Contributor address City; State; Zip Code [redacted] Houston TX 77079	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	John Jeter Contributor address; City; State; Zip Code [redacted] Houston TX 77009	500.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 22/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filer)
0

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)
07/16/2001	J. Johnson [redacted] Houston TX 77077	130.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/21/2001	J.H. Jones [redacted] Houston TX 77019	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/15/2001	Michael Jozwiak [redacted] Houston TX 77008-6433	50.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/07/2001	Michael Jozwiak [redacted] Houston TX 77008-6433	50.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/26/2001	Lee Kaplan [redacted] Houston TX 77019	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 23/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

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)
07/12/2001	Donald Kendall [redacted] Houston TX 77024	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/25/2001	Maurice Kennedy [redacted] Houston TX 77062	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/25/2001	Ted Kennedy [redacted] Houston TX 77019	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/13/2001	Mohammad Khorram [redacted] Katy TX 77450	1000.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/24/2001	Donald Kidd [redacted] Houston TX 77006-2412	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 24/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

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)
07/25/2001	Russell King [redacted] Houston TX 77224	150.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/30/2001	Heidi Kirkpatrick [redacted] Houston TX 77024	640.00	HQ Computer Networking

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Tony Kuehl [redacted] Houston TX 77080	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/11/2001	Marc Ladin [redacted] Houston TX 77006-4215	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/25/2001	Landry's Restaurant PAC [redacted] Houston TX 77027	1000.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 25/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission form)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/12/2001	Alice Lee 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77096	100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Mark Lee Contributor address; City; State; Zip Code [redacted] Houston TX 77096	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/19/2001	Lou Leonard Contributor address; City; State; Zip Code [redacted] Houston TX 77019	30.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Lou Leonard Contributor address; City; State; Zip Code [redacted] Houston TX 77019	30.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	Charles Leslie Contributor address; City; State; Zip Code [redacted] Houston TX 77002	250.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 26/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission use only)
0

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)
07/18/2001	Paul Long [redacted] Houston TX 77056	250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
08/15/2001	Brenda Love [redacted] Houston TX 77056	1000.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/16/2001	William Lu [redacted] Houston TX 77077	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/09/2001	Victor Lum [redacted] Sugar Land TX 77478-3451	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/10/2001	Amy Mac Dougall [redacted] Houston TX 77005-3719	200.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 27/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/01/2001	Scott Marrs 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77005	500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/11/2001	W. Marshall Contributor address; City; State; Zip Code [redacted] Houston TX 77079	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/2001	Nancy Martin Contributor address; City; State; Zip Code [redacted] Houston TX 77010	250.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/2001	Nancy Martin Contributor address; City; State; Zip Code [redacted] Houston TX 77010	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/05/2001	Conrad Masterson Contributor address; City; State; Zip Code [redacted] Houston TX 77098	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS G/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 28/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use) 0

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)
09/25/2001	William Maynard [redacted] Houston TX 77024	791.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
08/24/2001	Susan McCullough [redacted] Houston TX 77027	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/01/2001	John McDowell [redacted] Houston TX 77010	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/01/2001	Sawnic McEntire [redacted] Houston TX 77005	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/07/2001	John McIntyre [redacted] Houston TX 77005	500.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 29/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use) 0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/13/2001	Cyrus Mehran [redacted] Bellaire TX 77401	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
09/13/2001	Joanne Mehran [redacted] Houston TX 77401	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/13/2001	M. Mehran [redacted] Bellaire TX 77401	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
08/12/2001	Ann Miller [redacted] Houston TX 77006	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/18/2001	John Miller [redacted] Dallas TX 75225	250.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 30/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Office Computer no. filers)
0

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)
09/27/2001	Mary Mohn [redacted] Houston TX 77057	100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/25/2001	Irene Moiel [redacted] Houston TX 77098	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/20/2001	Susanna Molcawer [redacted] Houston TX 77019	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/23/2001	Ricardo Molina [redacted] Houston TX 77077	200.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/25/2001	Mark Montondon [redacted] Houston TX 77098	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 31/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
08/09/2001	Daryl Moore	[redacted] Houston TX 77006	250.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/07/2001	Philip Morabito	[redacted] Houston TX 77027-3210	150.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Terry Morales	[redacted] Houston TX 77019	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/16/2001	Martin Moran	[redacted] Houston TX 77077	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/17/2001	Sara Morgan	[redacted] Houston TX 77019	100.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 32/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
08/20/2001	Bruce Morris [redacted] Houston TX 77063	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/18/2001	Gary Moss [redacted] Houston TX 77027	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/07/2001	Bryan Muecke [redacted] Bellaire TX 77401	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/19/2001	Bryan Muecke [redacted] Bellaire TX 77401	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/12/2001	Gary Murphy [redacted] Houston TX 77007-2733	1000.00	Delivery Service

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 33/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
09/18/2001	Har'an Murphy [redacted] Houston TX 77057	250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
08/15/2001	William Murrell [redacted] Houston TX 77088-5523	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Roxann Neumann [redacted] Houston TX 77055	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Tim Neumann [redacted] Houston TX 77055	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/24/2001	Elizabeth Newton [redacted] Houston TX 77019	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 34/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
07/01/2001	William Norvell	[redacted] Houston TX 77056	500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
08/31/2001	David Orr	[redacted] Houston TX 77057	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/21/2001	Jennifer Paden	[redacted] Houston TX 77005-1615	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/31/2001	Walter Paine	[redacted] Houston TX 77027	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/13/2001	James Parish	[redacted] Conroe TX 77304	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 35/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use) 0

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)
09/25/2001	Jeffrey Parsons	[redacted] Houston TX 77024	790.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/17/2001	Kip Patterson	[redacted] Houston TX 77006	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Susie Peake	[redacted] Houston TX 77027	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/18/2001	Gary Pearce	[redacted] Houston TX 77235-5068	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
08/30/2001	Jeffery Pendergraft	[redacted] Houston TX 77007	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 36/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

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)
08/12/2001	Todd Philips [redacted] Houston TX 77004	100.00	Headquarters Supplies

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/24/2001	David Pratt [redacted] Houston TX 77009	5000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Edlyn Pursell [redacted] Houston TX 77057	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/17/2001	Matthew Ramsey [redacted] Houston TX 77256	2500.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/12/2001	Jen Rau [redacted] Houston TX 77006	350.11	Maps

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 37/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filers)
0

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)
09/12/2001	Randal Ray [redacted] Houston TX 77006	100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/27/2001	Vesta Rea-Gaubert [redacted] Spring TX 77379	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/06/2001	Frank Rea [redacted] Houston TX 77057	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/09/2001	Barrett Reasoner [redacted] Houston TX 77002	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/13/2001	James Reeder [redacted] McLean VA 22101	1000.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 38/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
09/18/2001	James Reeder [redacted] Houston TX 77056	1000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
07/13/2001	Charles Robinson [redacted] Houston TX 77056	1000.00	

Principal occupation (Optional) | Employer (Optional)

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)
08/15/2001	Irwin Rosenstein [redacted] Glen Rock NJ 07542	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/04/2001	Ann Rowe [redacted] Houston TX 77027	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/18/2001	James Russ [redacted] Houston TX 77042	500.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 39/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/16/2001	Daniel Shank 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77027	500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2001	Cynthia Siegel Contributor address; City; State; Zip Code [redacted] Bellaire TX 7740'	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/15/2001	Nancy Sims Contributor address; City; State; Zip Code [redacted] Houston TX 77252-2405	1575.00	Headquarters Equipme - nt
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	Kristi Sliva-Thibaut Contributor address; City; State; Zip Code [redacted] Sugar Land TX 77479	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2001	Marty Smith Contributor address; City; State; Zip Code [redacted] Houston TX 77098	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 40/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (If this Commission filer) 0

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)
08/12/2001	Mark Solomon [redacted] Houston TX 77069	125.00	Headquarters Supplies

9 Principal occupation (Optional)	10 Employer (Optional)

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)
07/05/2001	Frank Staggs [redacted] Houston TX 77006-4247	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/25/2001	Michael Stanley [redacted] Houston TX 77005	791.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/05/2001	Michele Stanton [redacted] Houston TX 77057	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/27/2001	Michele Stanton [redacted] Houston TX 77057	100.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 41/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filers)
0

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)
07/18/2001	Keith Steffek [redacted] Katy TX 77494-5621	500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/24/2001	S. Stockton [redacted] Houston TX 77024-403	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/03/2001	Laura Suffield [redacted] Houston TX 77057	100.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/26/2001	John Swanson [redacted] Houston TX 77095	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/01/2001	Blake Tartt [redacted] Houston TX 77056	500.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 42/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
08/28/2001	Henry Taub 6 Contributor address; City; State; Zip Code [redacted] Houston TX 77024	150.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/05/2001	Tray Taylor Contributor address; City; State; Zip Code [redacted] Houston TX 77056	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/02/2001	Raymond Thomas Contributor address; City; State; Zip Code [redacted] Houston TX 77024-6812	200.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/24/2001	Kay Thompson Contributor address; City; State; Zip Code [redacted] Houston TX 77077	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out of state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	Ben Tinnin Contributor address; City; State; Zip Code [redacted] Houston TX 77077	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 43/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission form)
0

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)
09/25/2001	David Tippetts [redacted] Houston TX 77005	100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
09/26/2001	Fisher Trigg [redacted] Houston TX 77081	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/25/2001	Gene Van Dyke [redacted] Houston TX 77019	500.00	

Principal occupation (Optional) | Employer (Optional)

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)
07/18/2001	Joe Van Matre [redacted] Lafayette LA 70509	1000.00	

Principal occupation (Optional) | Employer (Optional)

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)
09/27/2001	Janice Walden [redacted] Houston TX 77018	100.00	

Principal occupation (Optional) | Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 44/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
08/31/2001	Jim Ward 6 Contributor address; City; State; Zip Code [redacted] Spring TX 77379	2500.00	

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/09/2001	Clinton Wells Contributor address; City; State; Zip Code [redacted] Houston TX 77006	50.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/21/2001	Clinton Wells Contributor address; City; State; Zip Code [redacted] Houston TX 77006	25.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2001	Jana Wells Contributor address; City; State; Zip Code [redacted] Houston TX 77057	150.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/23/2001	P. Wells Contributor address; City; State; Zip Code [redacted] Fulshear TX 77441	100.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 45/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Not Commission Item)
0

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/11/2001	Michael Whitaker 6 Contributor address; City; State; Zip Code [redacted] Humble TX 77346	500.00	

9 Principal occupation (Optional)

10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/2001	Christopher Willman Contributor address; City; State; Zip Code [redacted] Spring TX 77379	100.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/17/2001	Hal Wilson Contributor address; City; State; Zip Code [redacted] Houston TX 77292-0935	250.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/03/2001	Joanne Wilson Contributor address; City; State; Zip Code [redacted] Houston TX 77027	100.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/25/2001	Joanne Wilson Contributor address; City; State; Zip Code [redacted] Houston TX 77027	100.00	

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 46/103

2 FILER NAME
Mr. Chris Bell

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)
07/25/2001	Charles Womack	[redacted] Houston TX 77079	250.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
08/21/2001	Margaret Works	[redacted] Houston TX 77063	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2001	Jamie Wright	[redacted] Bellaire TX 77401-3408	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/18/2001	George Zenner	[redacted] Houston TX 77042	200.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/26/2001	Thomas Zenner	[redacted] Houston TX 77057	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE **A 1**
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 47/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

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)
09/20/2001	Frances Zook [redacted] Atlanta GA 30327	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(D#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/19/2001	Stacie Zuber [redacted] Houston TX 77081	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/25/2001	Stacie Zuber [redacted] Houston TX 77081	25.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 48/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	100 Club 1233 West Loop South,Suite 1250 Houston TX 77027	100.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Sponsorship/Ads

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 ($)
07/31/2001	3 Men Movers 3411 Houston #A Houston TX 77009	199.20

Purpose of expenditure (See instructions regarding type of information required.)
Moving 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 ($)
09/07/2001	A1 Movers 8801 Jamoel #160 Houston TX 77040	210.00

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/20/2001	AOL 16023 East Freeway #36 Channelview TX 77530	51.10

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 49/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/20/2001	Airbrush Images 850 N. FM 3083 Conroe TX 77373	4546.50

8 Purpose of expenditure (See instructions regarding type of information required.)
Outdoor Signage

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 ($)
09/01/2001	Area 51 Films 1501 Colorado Avenue Santa Monica CA 90404	12808.00

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

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 ($)
09/07/2001	BFI P.O. Box 78703 Phoenix AZ 85062	62.79

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/14/2001	BFI P.O. Box 78703 Phoenix AZ 85062-8703	72.90

Purpose of expenditure (See instructions regarding type of information required.)
Campaign Office HQ

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 50/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	BFM Printing Post Office Box 270148 Houston TX 77277	102.84

8 Purpose of expenditure (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 ($)
07/02/2001	BFM Printing Post Office Box 270148 Houston TX 77277	156.96

Purpose of expenditure (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 ($)
07/02/2001	BFM Printing Post Office Box 270148 Houston TX 77277	715.53

Purpose of expenditure (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 ($)
07/02/2001	BFM Printing Post Office Box 270148 Houston TX 77277	329.08

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 51/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	BFM Printing Post Office Box 270148 Houston TX 77277	55.21

8 Purpose of expenditure (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 ($)
07/31/2001	BFM Printing Post Office Box 270148 Houston TX 77277	40.05

Purpose of expenditure (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 ($)
07/31/2001	BFM Printing Post Office Box 270148 Houston TX 77277	407.02

Purpose of expenditure (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 ($)
08/15/2001	BFM Printing Post Office Box 270148 Houston TX 77277	227.33

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 52/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/10/2001	Karen Becerra 4307 Tulsa Road,#1 Houston TX 77092	1500.00

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

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 ($)
09/01/2001	Karen Becerra 4307 Tulsa Road,#1 Houston TX 77092	1500.00

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

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 ($)
07/02/2001	Alison Bell 4103 Underwood Houston TX 77025	56.87

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

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 ($)
07/02/2001	Alison Bell 4103 Underwood Houston TX 77025	58.43

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 Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 53/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	Alison Bell 4103 Underwood Houston TX 77025	58.42

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/15/2001	Alison Bell 4103 Underwood Houston TX 77025	56.90

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/15/2001	Alison Bell 4103 Underwood Houston TX 77025	94.15

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 Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/15/2001	Alison Bell 4103 Underwood Houston TX 77025	168.80

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 54/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Benjy's 2424 Dunstan Houston TX 77005	10.25

8 Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
08/01/2001	Benjy's 2424 Dunstan Houston TX 77005	111.38

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
08/01/2001	Brennan's of Houston 3300 Smith Houston TX 77006	546.73

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/07/2001	Brennan's of Houston 3300 Smith Houston TX 77006	116.34

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 55/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2001	Broadcast News Reports 3300 Chimney Rock,Suite 210 Houston TX 77056	455.73

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

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 ($)
08/01/2001	Eric Burns 1201 Bering,#97 Houston TX 77057	7000.00

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

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 ($)
09/01/2001	Eric Burns 1201 Bering,#97 Houston TX 77057	5000.00

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

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 ($)
09/05/2001	C & M Marketing 11451 Katy Freeway,Suite 215 Houston TX 77079	10000.00

Purpose of expenditure (See instructions regarding type of information required.)
TV/Radio

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 56/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/27/2001	C & M Marketing 11451 Katy Freeway,Suite 215 Houston TX 77079	5000.00

8 Purpose of expenditure (See instructions regarding type of information required.)
TV/Radio

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 ($)
07/13/2001	Carlton Staffing P.O. Box 297327 Houston TX 77297-7327	574.63

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

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 ($)
09/20/2001	City of Houston Parks & Recreation 2999 S. Wayside Drive Houston TX 77023	290.00

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

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 ($)
09/05/2001	Clarion Hotel 612 Cathedral Street Baltimore MD 21201	147.25

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 57/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/05/2001	Clarion Hotel 312 Cathedral Street Baltimore MD 21201	147.25

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

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 ($)
09/05/2001	Continental Airlines 17431 John F. Kennedy Blvd. Houston TX 77032	213.75

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

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 ($)
07/13/2001	Copy.com 1201 Westheimer - F Houston TX 77006	281.45

Purpose of expenditure (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 ($)
09/01/2001	Copy.com 1201 Westheimer - F Houston TX 77006	87.68

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 58/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Copy.com 1201 Westheimer - F Houston TX 77006	103.92

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

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 ($)
09/01/2001	Copy.com 1201 Westheimer - F Houston TX 77006	37.09

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

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 ($)
09/14/2001	Copy.com 1201 Westheimer - F Houston TX 77006	4.44

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

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 ($)
09/14/2001	Copy.com 1201 Westheimer - F Houston TX 77006	103.92

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 59/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/14/2001	Copy.com 1201 Westheimer - F Houston TX 77006	37.89

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

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 ($)
09/14/2001	Copy.com 1201 Westheimer - F Houston TX 77006	77.94

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

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 ($)
09/14/2001	Copy.com 1201 Westheimer - F Houston TX 77006	378.59

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

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 ($)
09/20/2001	Crapitto's 2400 Midlane Houston TX 77027	72.54

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 60/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Crostini's 2411 S. Shepherd Drive Houston TX 77019	64.58

8 Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/20/2001	Damian's Cucina Italiana 3011 Smith Street Houston TX 77006	247.70

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/20/2001	Downing Street 2549 Kirby Drive Houston TX 77019	57.00

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
07/16/2001	Econtributor.com PO Box 230100 Centreville VA 20120-0100	168.50

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 61/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Office Continuation Page)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/15/2001	Econtributor.com PO Box 230100 Centreville VA 20120-0100	27.50

8 Purpose of expenditure (See instructions regarding type of information required.)
Bank Fee

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 ($)
08/31/2001	Econtributor.com PO Box 230100 Centreville VA 20120-0100	114.50

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

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 ($)
09/07/2001	Econtributor.com PO Box 230100 Centreville VA 20120-0100	4.00

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

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 ($)
08/01/2001	El Patio 6300 Hillcroft Street,#617 Houston TX 77081	17.41

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 62/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/05/2001	El Patio 6300 Hillcroft Street,#617 Houston TX 77081	27.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/05/2001	El Patio 6300 Hillcroft Street,#617 Houston TX 77081	75.64

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/20/2001	El Patio 6300 Hillcroft Street,#617 Houston TX 77081	24.19

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
07/13/2001	Fairly Painless Advertising 44 East 8th Street Holland MI 49423	3112.56

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 63/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Name)
0

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
07/02/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	2500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Contract Labor

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 ($)
08/01/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	2500.00

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

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 ($)
09/01/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	2500.00

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

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 ($)
09/07/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	35.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 64/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)	8 Purpose of expenditure (See instructions regarding type of information required.)	9 Complete if direct expenditure to benefit C/OH ** Cand date / Officeholder name / Office sought / Office held
09/07/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	25.10	Campaign HQ Supplies	
09/07/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	22.35	Campaign HQ Supplies	
09/07/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	17.85	Campaign HQ Supplies	
09/07/2001	Jill Garrison 955 Westcott #64 Houston TX 77007	6.04	Campaign HQ Supplies	

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 65/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Name)
0

4 Date	5 Payee name	7 Amount ($)
09/07/2001	Jill Garrison 6 Payee address; City; State; Zip Code 955 Westcott #64 Houston TX 77007	6.44

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name	Amount ($)
09/07/2001	Jill Garrison Payee address; City; State; Zip Code 955 Westcott #64 Houston TX 77007	10.71

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name	Amount ($)
09/07/2001	Jill Garrison Payee address; City; State; Zip Code 955 Westcott #64 Houston TX 77007	5.06

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name	Amount ($)
08/01/2001	HEB Payee address; City; State; Zip Code 9215 West Road Houston TX 77064	52.72

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 66/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Nos)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/27/2001	Hearn Printing 600 McGowen Street Houston TX 77006	2481.00

8 Purpose of expenditure (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 ($)
07/31/2001	Horizons 9444 Old Katy Road #110 Houston TX 77055	205.44

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

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 ($)
07/02/2001	Houston Cellular Post Office Box 660732 Houston TX 75266-0732	180.17

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

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 ($)
07/31/2001	Houston Cellular Post Office Box 660732 Houston TX 75266-0732	182.01

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 67/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
C

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Houston Cellular Post Office Box 660732 Houston TX 75266-0732	285.42

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ 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 ($)
09/07/2001	Houston Chronicle P.O. Box 4570 Houston TX 77210-4570	51.00

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

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 ($)
09/07/2001	Houston Heights Association P.O. Box 70735 Houston TX 77270	100.00

Purpose of expenditure (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 ($)
08/10/2001	Houston Polo Club 1433 West Loop South,#150 Houston TX 77027	500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 68/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/16/2001	Infinity Outdoors 1600 Sturlamont Street Houston TX 77007	46835.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Outdoor Signage

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 ($)
07/20/2001	Jewish Herald Voice 3403 Audley Houston TX 77098	700.00

Purpose of expenditure (See instructions regarding type of information required.)
Sponsorship/Ads

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 ($)
07/02/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	1000.00

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

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 ($)
07/13/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	1000.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 69/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	2000.00

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

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 ($)
08/15/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	218.00

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

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 ($)
08/20/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	300.00

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

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 ($)
09/01/2001	Dan Jones 10646 Duke of York Court Houston TX 77070	2000.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 70/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Veronica Juarez 7357 Cayton Houston TX 77061	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Contract Labor

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 ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	2.11

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	10.00

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	4.20

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 71/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Sponsorship/Ads

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 ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	11.86

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/20/2001	Veronica Juarez 7357 Cayton Houston TX 77061	22.08

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/01/2001	Veronica Juarez 7357 Cayton Houston TX 77061	275.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 72/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/14/2001	Veronica Juarez 7357 Cayton Houston TX 77061	6.50

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

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 ($)
09/14/2001	Veronica Juarez 7357 Cayton Houston TX 77061	200.00

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

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 ($)
07/02/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	1000.00

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

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 ($)
07/13/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	34.56

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 73/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Office Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/13/2001	Kaleidoscope Group 5757 Woodway Suite 250 Houston TX 77057	69.51

8 Purpose of expenditure (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 ($)
07/13/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	2500.00

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

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 ($)
08/01/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	1000.00

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

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 ($)
09/01/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	1000.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 74/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Office Correction Fee)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/12/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	2716.90

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
09/12/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	630.71

Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
09/24/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	331.52

Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
09/27/2001	Kaleidoscope Group 5757 Woodway,Suite 250 Houston TX 77057	746.77

Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 75/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	25000.00

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

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 ($)
07/02/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	3749.56

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

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 ($)
07/31/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	1211.29

Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
07/31/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	1015.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 76/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filer)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	8500.00

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

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 ($)
09/01/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	1707.52

Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
09/01/2001	Lone Star Strategies 1616 S. Voss,Suite 820 Houston TX 77057	10000.00

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

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 ($)
08/01/2001	Los Tios 9527 Westheimer Road Houston TX 77063	58.83

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 77/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City, State; Zip Code	7 Amount ($)
08/20/2001	Mail Boxes Etc. 6524 San Felipe Houston TX 77057	144.00

8 Purpose of expenditure (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 ($)
09/14/2001	Mail Boxes Etc. 6524 San Felipe Houston TX 77057	142.54

Purpose of expenditure (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 ($)
08/01/2001	Molina's 7901 Westheimer Road Houston TX 77063	92.68

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
08/01/2001	Molina's 7901 Westheimer Road Houston TX 77063	22.93

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 78/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/01/2001	Molina's 7901 Westheimer Road Houston TX 77063	24.18

8 Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/05/2001	Molina's 7901 Westheimer Road Houston TX 77063	21.94

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/20/2001	Molina's 7901 Westheimer Road Houston TX 77063	63.53

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
07/02/2001	Bethel Nathan 4007 Wayne Street Houston TX 77026	1000.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 79/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Enter Combination Filer)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2001	Office Max 1576 West Gray Houston TX 77019	77.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ 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 ($)
09/07/2001	Office Max 1576 West Gray Houston TX 77019	100.21

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
08/01/2001	Patrenella's Cafe 813 Jackson Hill Street Houston TX 77007	54.01

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
09/27/2001	John Peoples c/o Houston Polo Club 8552 Memorial Drive Houston TX 77024	500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 80/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	Quantum Concepts Post Office Box 2405 Houston TX 77252	25000.00

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

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 ($)
08/01/2001	Quantum Concepts Post Office Box 2405 Houston TX 77252	29452.00

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

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 ($)
09/05/2001	Quantum Concepts Post Office Box 2405 Houston TX 77252	50000.00

Purpose of expenditure (See instructions regarding type of information required.)
TV/Radio

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 ($)
09/27/2001	Quantum Concepts Post Office Box 2405 Houston TX 77252	40000.00

Purpose of expenditure (See instructions regarding type of information required.)
TV/Radio

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 81/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/02/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	7500.00

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

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 ($)
07/25/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	3015.00

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

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 ($)
08/01/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	7500.00

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

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 ($)
08/02/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	200.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 82/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filer)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/02/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	322.83

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

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 ($)
08/02/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	973.00

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

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 ($)
09/01/2001	Quantum Consultants P.O. Box 2405 Houston TX 77252	8500.00

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

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 ($)
07/02/2001	Robert Quarles 2303 Lamonte Houston TX 77018	1500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: E3/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/06/2001	Robert Quarles 2303 Lamonte Houston TX 77018	135.00

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

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 ($)
07/20/2001	Robert Quarles 2303 Lamonte Houston TX 77018	103.19

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

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 ($)
08/01/2001	Robert Quarles 2303 Lamonte Houston TX 77018	1500.00

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

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 ($)
08/15/2001	Robert Quarles 2303 Lamonte Houston TX 77018	38.92

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 84/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/15/2001	Robert Quarles 2303 Lamonte Houston TX 77018	25.10

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

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 ($)
09/15/2001	Robert Quarles 2303 Lamonte Houston TX 77018	68.16

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

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 ($)
08/27/2001	Robert Quarles 2303 Lamonte Houston TX 77018	245.92

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

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 ($)
09/01/2001	Robert Quarles 2303 Lamonte Houston TX 77018	1500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 85/103

2 FILER NAME
Mr. Chris Ball

3 ACCOUNT # (Ethics Commission Name)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/12/2001	Robert Quarles 2303 Lamonte Houston TX 77018	11.67

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

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 ($)
09/12/2001	Robert Quarles 2303 Lamonte Houston TX 77018	19.00

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

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 ($)
08/10/2001	Rag Printing,Inc. 1516 Shepherd Drive Houston TX 77007	1905.20

Purpose of expenditure (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 ($)
08/15/2001	Rag Printing,Inc. 1516 Shepherd Drive Houston TX 77007	1273.01

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 86/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2001	Rag Printing,Inc. 1516 Shepherd Drive Houston TX 77007	1273.01

8 Purpose of expenditure (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 ($)
08/20/2001	Reliant P.O. Box 1545 Houston TX 77251-1700	131.09

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

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 ($)
09/14/2001	Reliant P.O. Box 1545 Houston TX 77251-1700	293.65

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

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 ($)
09/05/2001	Roll-N Saloon 4200 San Felipe Houston TX 77027	55.00

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 87/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/14/2001	Sacred Heart Society 816 E. Whitney Houston TX 77022	650.00

8 Purpose of expenditure (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 ($)
07/02/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	1500.00

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

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 ($)
07/31/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	15.09

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

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 ($)
07/31/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	21.64

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 88/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
C

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	21.64

8 Purpose of expenditure (See instructions regarding type of information required.)
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 ($)
07/31/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	4.00

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

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 ($)
07/31/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	107.70

Purpose of expenditure (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 ($)
08/01/2001	Sheila Sorvari 738 Cortlandt Houston TX 77007	1500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 89/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	Southwest Bank 1075 Augusta Houston TX 77057	1.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Bank Fee

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 ($)
09/06/2001	Southwest Bank 1075 Augusta Houston TX 77057	1250.00

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 Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/27/2001	Southwest Bank 1075 Augusta Houston TX 77057	9.00

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

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 ($)
07/02/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	121.13

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 90/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	125.03

8 Purpose of expenditure (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 ($)
08/20/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	489.24

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

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 ($)
08/20/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	1024.69

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

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 ($)
09/14/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	645.98

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 91/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use): 0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/27/2001	Southwestern Bell 266 Post Office Box 3025 Houston TX 77097-0043	446.36

8 Purpose of expenditure (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 ($)
08/10/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	5547.81

Purpose of expenditure (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 ($)
09/01/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	1380.19

Purpose of expenditure (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 ($)
09/01/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	5547.81

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 92/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/07/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	2284.08

8 Purpose of expenditure (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 ($)
09/07/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	2370.68

Purpose of expenditure (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 ($)
09/27/2001	Sprint Digital Print 3612 Magnum,Suite 107 Houston TX 77092	4708.80

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

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 ($)
09/27/2001	Sprint P.O. Box 660750 Dallas TX 75266-0750	480.28

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 93/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Name)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/01/2001	Stanford Research 3355 Bee Caves Road,Suite 715 Austin TX 78746	5000.00

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

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 ($)
07/02/2001	Stanford Research 3355 Bee Caves Road,Suite 715 Austin TX 78746	163.77

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

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 ($)
07/06/2001	Jeff Steen 5643 Ella Lee Lane Houston TX 77056	334.60

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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 ($)
08/01/2001	The Stables 3734 Westheimer Road Houston TX 77027	154.68

Purpose of expenditure (See instructions regarding type of information required.)
Food/Bev.

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 94/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/20/2001	Time Warner Communications P.O. Box 650050 Dallas TX 75265-0050	36.32

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

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 ($)
09/14/2001	Time Warner Communications P.O. Box 650050 Dallas TX 75265-0050	167.45

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

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 ($)
07/31/2001	Time Warner 8400 West Tidwell Houston TX 77040	477.90

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

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 ($)
09/01/2001	Dawn Trozzo 6161 Piping Rock Houston TX 77057	1500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 95/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use): 0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/10/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	340.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage - Mailing

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 ($)
09/07/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	550.00

Purpose of expenditure (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 ($)
09/07/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	1360.00

Purpose of expenditure (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 ($)
09/07/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	42.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 96/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/20/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	1020.00

8 Purpose of expenditure (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 ($)
09/24/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	538.00

Purpose of expenditure (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 ($)
09/24/2001	U.S. Postmaster Unity Drive Richmond Hillcroft Station Houston TX 77057-9998	102.00

Purpose of expenditure (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 ($)
07/02/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	1000.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 97/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Use)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	43.02

8 Purpose of expenditure (See instructions regarding type of information required.)
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 ($)
08/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	1000.00

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

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 ($)
08/02/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	750.00

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

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 ($)
09/01/2001	Sally Walker Davies 1225 Alma,Suite C Tomball TX 77375	2831.82

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 98/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	4.33

8 Purpose of expenditure (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 ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	135.31

Purpose of expenditure (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 ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	11.52

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	62.33

Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ Supplies

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 99/103

2 FILER NAME
Mr. Chris Ball

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	4.31

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign HQ 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 ($)
09/01/2001	Sally Walker Davies 6212 Briar Rose Drive Houston TX 77057	1500.00

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

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 ($)
07/31/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	63.66

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

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 ($)
07/31/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	1.08

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 100/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/31/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	7.04

8 Purpose of expenditure (See instructions regarding type of information required.)
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 ($)
07/31/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	40.00

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

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 ($)
07/31/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	10.00

Purpose of expenditure (See instructions regarding type of information required.)
Sponsorship/Ads

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 ($)
08/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	1500.00

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 101/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission Name)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	20.21

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

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 ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	17.87

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

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 ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	18.20

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

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 ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	20.50

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 102/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission filers)
0

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	16.03

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

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 ($)
09/01/2001	Brent Wallace 8006 Lichen Lane Spring TX 77379	110.42

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

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 ($)
07/02/2001	Xpedite P.O. Box 14024 Newark NJ 07198-0024	77.51

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

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 ($)
07/31/2001	Xpedite P.O. Box 14024 Newark NJ 07198-0024	153.91

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 103/103

2 FILER NAME
Mr. Chris Bell

3 ACCOUNT # (Ethics Commission files): 0

4 Date	5 Payee name	7 Amount ($)
08/10/2001	Xpedite 6 Payee address; City; State; Zip Code P.O. Box 14024 Newark NJ 07198-0024	153.58

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

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