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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received

RECEIVED FEB 10 2003 CITY SECRETARY

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: MR. FIRST: MICHAEL MI:

NICKNAME: LAST: BERRY SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

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

223 WESTHEIMER
HOUSTON, TX. 77006

5 CAMPAIGN TREASURER NAME

TITLE: MR. FIRST: BRUCE MI:

NICKNAME: LAST: LABOON SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

600 TRAVIS
HOUSTON, TX. 77002

7 CAMPAIGN TREASURER PHONE

AREA CODE: (713) PHONE NUMBER: 226-1200 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: 7 / 1 / 2002 THROUGH Month Day Year: 12 / 31 / 2002

10 ELECTION

ELECTION DATE Month Day Year: / /

ELECTION TYPE ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): ELECTED OFFICIAL

12 OFFICE SOUGHT (if known): MAYOR

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

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: MICHAEL BERRY

15 ACCOUNT # (Ethics Commission filers)

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	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
☐ additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS

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	$ -0-
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ -0-
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED ALL ARE ITEMIZED	$ —
	4. **TOTAL POLITICAL EXPENDITURES**	$ 15,108.00 XX
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

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

TROY D. LEMON NOTARY PUBLIC STATE OF TEXAS EXPIRES 06-08-2004

AFFIX NOTARY STAMP/SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Berry, this the 10th day of February, 20 03, 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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 1 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/17/02	HISPANIC CHAMBER OF COMMERCE 2900 WOODRIDGE HOUSTON 77087	300.00 XX

8 Purpose of payment (See instructions regarding type of information required.): CONFERENCE COST

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 ($)
7/25/02	U.S. POST OFFICE 1900 W. GRAY HOUSTON 77006	499.50 XX

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2/02	WESLEY CHAPEL AME 2209 DOWLING HOUSTON 77004	350.00 XX

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

•• 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 ($)
8/15/02	MAILBOXES ETC. 2450 LOUISIANA HOUSTON 77006	130.00 XX

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 2 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/16/02	GITTINGS PORTRAITURE 1111 UPTOWN PARK HOUSTON 77056	$ 119.08

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

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 ($)
8/20/02	CITY OF HOUSTON 900 BAGBY HOUSTON 77002	100.00

Purpose of payment (See instructions regarding type of information required.): CITY COUNCIL OFFICE REFRIGERATOR PURCHASE

-- 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 ($)
8/19/02	SOUTHWESTERN BELL 2525 N. LOOP WEST HOUSTON 77008	69.71

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

-- 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 ($)
8/21/02	HOUSTON CHRONICLE 801 TEXAS AVE. HOUSTON 77002	34.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 3 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
8/26/02	CEO COMMUNICATIONS INC. 3810 SUNSET [redacted] HOUSTON 77005	$ 1200.00

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

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 ($)
8/28/02	BLACK HERITAGE GALLERY 5408 ALMEDA HOUSTON 77004	433.33

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

-- 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 ($)
8/28/02	EZ PRINTS 5823 AUTUMN FOREST HOUSTON 77092	19.29

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9/16/02	BROADCAST NEWS 6300 RICHMOND HOUSTON 77057	102.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 4 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
9/20/02	REEL CONNECTION 1807 BRIARMEADE [redacted] HOUSTON 77057	$500.00

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

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 ($)
9/23/02	BROADCAST NEWS CORP. 6300 RICHMOND HOUSTON 77057	101.15

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

-- 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 ($)
9/23/02	HOUSTON CHRONICLE 801 TEXAS HOUTON, TX. 77002	186.00

Purpose of payment (See instructions regarding type of information required.): NEWSPAPER 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 ($)
9/23/02	CITY OF HOUSTON 900 BAGBY HOUSTON 77002	0.11

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 5 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/02/02	A.P. GRAPHICS 2411 TIMES BLVD. HOUSTON 77005	$1,000.00

8 Purpose of payment (See instructions regarding type of information required.): PRINTING DESIGNS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/02/02	SAN JACINTO CLUB UNKNOWN HOUSTON 77002	1,000.00 XX

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/02	CITY OF HOUSTON 900 BAGBY HOUSTON 77002	453.53 XX

Purpose of payment (See instructions regarding type of information required.): TV PURCHASE - CITY COUNCIL

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/02	AARON BROTHERS 3057 W. HOLCOMBE HOUSTON 77025	162.27

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 6 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/25/02	MAILBOXES ETC. 2450 LOUISIANA HOUSTON 77006	# 22.28 XX

8 Purpose of payment (See instructions regarding type of information required.): MAILBOX RENTAL

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/31/02	HOUSTON LIVESTOCK SHOW & RODEO 8701 KIRBY HOUSTON 77054	53.93 XX

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/31/02	Southwestern BELL 2525 N. LOOP WEST HOUSTON 77008	129.33 XX

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/5/02	AARON BROTHERS 3057 W. HOLCOMBE HOUSTON 77025	103.92 XX

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: PAGE 7 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/13/02	CITY OF HOUSTON 900 BAGBY HOUSTON 77002	$ 861.95

8 Purpose of payment (See instructions regarding type of information required.): LETTERHEADS 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 ($)
11/19/02	SEARS 4201 S. MAIN HOUSTON 77005	305.47

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/1/02	BALY PROJECTS 5007 WEATHERSTONE SUGARLAND, TX 77479	3,000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/3/02	U.S. POST OFFICE 1900 W. GRAY HOUSTON 77006	1110.00 XX

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F: PAGE 8 OF 9

2 FILER NAME: MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/10/02	SAM'S DISCOUNT STORE 1615 S. LOOP WEST HOUSTON 77054	$ 129.54

8 Purpose of payment (See instructions regarding type of information required.): PARTY REFRESHMENTS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11/02	HOUSTON AREA [redacted] URBAN LEAGUE 1301 TEXAS HOUSTON 77002	$ 100.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/13/02	City of Houston 900 BAGBY HOUSTON 77002	$ 125.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/16/02	[redacted] OFFICE DEPOT 5721 WESTHEIMER HOUSTON 77057	$ 300.00

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

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

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F: PAGE 9 OF 9

2 FILER NAME MICHAEL BERRY

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/16/02	CARL DAVIS 900 BAGBY HOUSTON 77002	101.43

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/31/02	A.P. GRAPHICS 2411 TIMES BLVD. HOUSTON 77005	2005.18

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

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

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

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

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

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