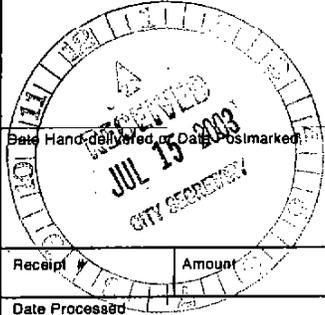


204

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<p><b>The C/OH INSTRUCTION GUIDE explains how to complete this form.</b></p>		<p><b>1 ACCOUNT #</b> (Ethics Commission filers)</p>	<p><b>2 Total pages filed:</b>  3</p>																					
<p><b>3 CANDIDATE / OFFICEHOLDER NAME</b></p>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px dashed black;">TITLE</td> <td style="width:30%; border-bottom: 1px dashed black;">FIRST</td> <td style="width:30%; border-bottom: 1px dashed black;">MI</td> </tr> <tr> <td></td> <td style="text-align: center;">JOHN</td> <td style="text-align: center;">E.</td> </tr> <tr> <td style="border-bottom: 1px dashed black;">NICKNAME</td> <td style="border-bottom: 1px dashed black;">LAST</td> <td style="border-bottom: 1px dashed black;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center;">CASTILLO</td> <td></td> </tr> </table>		TITLE	FIRST	MI		JOHN	E.	NICKNAME	LAST	SUFFIX		CASTILLO		<p style="text-align: center;"><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <div style="text-align: center;">  </div> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount</td> </tr> <tr> <td>Date Processed</td> <td></td> </tr> <tr> <td>Date Imaged</td> <td></td> </tr> </table>	Receipt #	Amount	Date Processed		Date Imaged				
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<p><b>11 OFFICE</b></p>	<p>OFFICE HELD (if any)</p> <p style="text-align: center;">N.A.</p>	<p><b>12 OFFICE SOUGHT</b> (if known)</p> <p style="text-align: center;">N.A. (HOUSTON CITY COUNCIL DISTRICT I)</p>																						
<p><b>13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b></p> <p><input type="checkbox"/> additional pages</p>	<p>** 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. **</p> <p>Name</p> <hr/> <p>Address / PO Box; Apt. / Suite #; City; State; Zip Code</p> <hr/>																							

**GO TO PAGE 2**



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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

*JOHN E. CASTILLO*

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

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 79.88

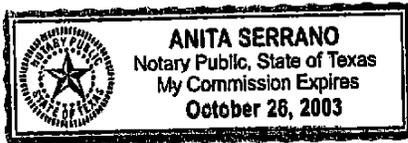
OUTSTANDING LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

19 AFFIDAVIT

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



*John E. Castillo*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JOHN E. CASTILLO, this the 14<sup>TH</sup> day of JULY, 20 03, to certify which, witness my hand and seal of office.

*Anita Serrano*  
Signature of officer administering oath

ANITA SERRANO  
Printed name of officer administering oath

*Notary Public*  
Title of officer administering oath

POLITICAL EXPENDITURES	SCHEDULE F
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The INSTRUCTION GUIDE explains how to complete this form.	1 Total pages Schedule F: <p style="text-align: center;">1</p>
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2 FILER NAME <p style="text-align: center; font-size: 1.1em;">JOHN E. CASTILLO</p>	3 ACCOUNT # (Ethics Commission filers)
---	--

4 Date <p style="text-align: center; font-size: 1.1em;">2/05/03</p>	5 Payee name <p style="text-align: center; font-size: 1.1em;">ANCHOR PRINTING</p>	7 Amount (\$) <p style="text-align: center; font-size: 1.1em;">47.63</p>
6 Payee address; City; State; Zip Code <p style="text-align: center; font-size: 1.1em;">122 E. TEXAS AVE BAYTOWN TX 77520</p>		

8 Purpose of payment (See instructions regarding type of information required.) <p style="text-align: center; font-size: 1.1em;">TYPESETTING FOR NUÑEZ APPRECIATION DINNER INVITATION</p>	9 <b>Complete if direct expenditure to benefit C/OH</b> Candidate / Officeholder name      Office sought      Office held
--	--

Date <p style="text-align: center; font-size: 1.1em;">2/02/03</p>	Payee name <p style="text-align: center; font-size: 1.1em;">CITY OF HOUSTON</p>	Amount (\$) <p style="text-align: center; font-size: 1.1em;">32.25</p>
Payee address; City; State; Zip Code <p style="text-align: center; font-size: 1.1em;">901 BAGBY HOUSTON TX 77002</p>		

Purpose of payment (See instructions regarding type of information required.) <p style="text-align: center; font-size: 1.1em;">COPY OF ELECTION RESULTS OF 11/06/02 ELECTION.</p>	9 <b>Complete if direct expenditure to benefit C/OH</b> Candidate / Officeholder name      Office sought      Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED