



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME  
Ada Edwards

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This listing includes 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 \$ 12539.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00

EXPENDITURE TOTALS

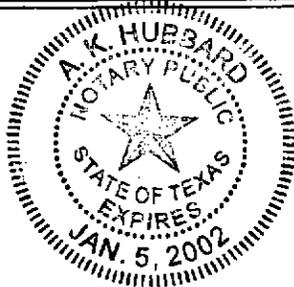
3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 17191.05

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.

*Ada Edwards*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ADA EDWARDS, this the 9 day of October, 2001, to certify which, witness my hand and seal of office.

*A. K. Hubbard*  
Signature of officer administering oath

Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>7/2/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Mary J Garrett</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>7/3/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ora T Grant</b>	7 Amount of contribution (\$): <b>\$10.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>7/6/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Frances S Flanagan</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77005-1081</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>7/11/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ester King</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>7/11/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>David D King</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77071-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.

1 Total pages this schedule A1: **21**2 FILER NAME: **Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/12/2001

5 Full Name of Contributor:

**Cherie L Jones** out of state PAC7 Amount of  
contribution (\$):**\$25.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED], Missouri City, TX 77489-

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

7/13/2001

5 Full Name of Contributor:

**Sylvia Orengo-Nania** out of state PAC7 Amount of  
contribution (\$):**\$100.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77025-2529

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

7/16/2001

5 Full Name of Contributor:

**Benjamin E Thompson** out of state PAC7 Amount of  
contribution (\$):**\$250.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77277-

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

7/18/2001

5 Full Name of Contributor:

**Isam A Herndon** out of state PAC7 Amount of  
contribution (\$):**\$75.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] San Diego, CA 92128-

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

7/19/2001

5 Full Name of Contributor:

**Carol E Moore** out of state PAC7 Amount of  
contribution (\$):**\$100.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77091-

9 Principal Occupation (Optional):

10 Employer (Optional):

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1**  
(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.

1 Total pages this schedule A1: **21**

2 FILER NAME: **Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date <b>7/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$49.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>		

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>7/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sandra C Tucker</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77045-</b>		

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>7/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Edia M Gladney</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77014-</b>		

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>7/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$30.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>		

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>7/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Clifford Morgan</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>		

9 Principal Occupation (Optional):	10 Employer (Optional):
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.	1 Total pages this schedule A1: <b>21</b>
2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>7/25/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Vanessa Edwards Foster</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 770824904</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>7/27/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Kim A Hadnot</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77013-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/3/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sederick E. Susberry</b>	7 Amount of contribution (\$): <b>\$300.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77061-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/4/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Carrington Grace</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Junior Sylvester Thompson</b>	7 Amount of contribution (\$): <b>\$250.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77083-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.	1 Total pages this schedule A1: <b>21</b>
2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>8/10/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Thomas R Wright</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>8/11/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Namoi Davis Brown</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>8/13/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$45.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>			

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>8/13/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Joan C. Edwards</b>	7 Amount of contribution (\$): <b>\$250.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			

9 Principal Occupation (Optional):	10 Employer (Optional):
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4 Date <b>8/14/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ron Johnson</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77002-</b>			

9 Principal Occupation (Optional):	10 Employer (Optional):
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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A1**

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.	1 Total pages this schedule A1: <b>21</b>
2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>8/18/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Gerrie J Frost</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77079-2810</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/18/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Priscilla K Misher</b>	7 Amount of contribution (\$): <b>\$10.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-2510</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/19/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>David K Arnosky</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77063-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/20/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$10.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/20/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Gary Teixeira</b>	7 Amount of contribution (\$): <b>\$500.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77007-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**  
(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.	1 Total pages this schedule A1: <b>21</b>
2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>8/21/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Vincent S Goodridge</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable): <b>Travel for Colin Applegate to Houston</b>
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77054-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ayesha G. Mutope-Johnson</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77006-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Roger Headen</b>	7 Amount of contribution (\$): <b>\$5.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77082-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Thomas Milton</b>	7 Amount of contribution (\$): <b>\$5.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77053-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Marqus Bogan</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77051-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A1**  
(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.

1 Total pages this schedule A1: **21**2 FILER NAME: **Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sabrina Midriff</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77019-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$75.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/23/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Bonita F Barnes</b>	7 Amount of contribution (\$): <b>\$500.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Missouri City, TX 77489-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/24/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Walter D Davis</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>8/24/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Bonita F Barnes</b>	7 Amount of contribution (\$): <b>\$250.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Missouri City, TX 77489-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>8/25/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Rose Upshaw</b> 6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77077-</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>8/25/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Rosalind Russell</b> 6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>	7 Amount of contribution (\$): <b>\$30.00</b>	8 In kind contribution (if applicable):
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>8/29/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Joe Pollet</b> 6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-1010</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>8/31/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Annise Parker Campaign</b> 6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/1/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Gordon Anderson</b> 6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77077-5423</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	

4 Date <b>9/1/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Slaughter &amp; Nealy P.L.L.C.</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77074-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/1/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sonya Lewis</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77053-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/1/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sonya Lewis</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77053-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/2/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Fulkra J Mason</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Kingwood, TX 77345-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/4/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Unallocated Misc. Cash Donations</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77266-7307</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A1**  
(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.

1 Total pages this schedule A1: **21**2 FILER NAME: **Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/4/2001

5 Full Name of Contributor:

 out of state PAC**Unallocated Misc. Cash Donations**7 Amount of  
contribution (\$):**\$20.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77266-7307

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

9/4/2001

5 Full Name of Contributor:

 out of state PAC**Unallocated Misc. Cash Donations**7 Amount of  
contribution (\$):**\$20.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77266-7307

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

9/4/2001

5 Full Name of Contributor:

 out of state PAC**Debra Danburg**7 Amount of  
contribution (\$):**\$100.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77266-6602

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

9/4/2001

5 Full Name of Contributor:

 out of state PAC**John W. H. Chiang**7 Amount of  
contribution (\$):**\$500.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX

77027-3211

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

9/4/2001

5 Full Name of Contributor:

 out of state PAC**Patricia J. Walsh**7 Amount of  
contribution (\$):**\$25.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

[REDACTED] Houston, TX 77006-1124

9 Principal Occupation (Optional):

10 Employer (Optional):

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>9/5/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Jeanette H. Rash</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77020</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/5/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Exa M Newsome</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/7/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>James B. Blackburn</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77027-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>David K Arnosky</b>	7 Amount of contribution (\$): <b>\$15.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77063-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Shereleta Collians</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Humble, TX 77396-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

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2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Denise L. Radford</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Candace H Beverly</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Eric R Dixon</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77081-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Evelyn Gates</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Sarah Beth</b>	7 Amount of contribution (\$): <b>\$200.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

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1 Total pages this schedule A1: **21**2 FILER NAME: **Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Elraletta F Muhmmad</b>	7 Amount of contribution (\$): <b>\$5.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77088-</b>		

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Robert S Muhammad</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>		

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Yufus F Muhammad</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77018-</b>		

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Total Woman Healthcare Center, PA</b>	7 Amount of contribution (\$): <b>\$300.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77029-</b>		

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date <b>9/8/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Dean Devoss</b>	7 Amount of contribution (\$): <b>\$20.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77006-</b>		

9 Principal Occupation (Optional):

10 Employer (Optional):

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

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1 Total pages this schedule A1: **21**

2 FILER NAME:

**Ada Edwards**

3 ACCOUNT # (Ethics Commission filers)

4 Date

**9/8/2001**

5 Full Name of Contributor:

**Monique R Mathis** out of state PAC7 Amount of  
contribution (\$):**\$50.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

**Baton Rouge, LA 70810-**

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

**9/8/2001**

5 Full Name of Contributor:

**Unallocated Misc. Cash Donations** out of state PAC7 Amount of  
contribution (\$):**\$5.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

**Houston, TX 77266-7307**

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

**9/9/2001**

5 Full Name of Contributor:

**Victoria j Sloan** out of state PAC7 Amount of  
contribution (\$):**\$100.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

**Sugar Land, TX 77478-**

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

**9/9/2001**

5 Full Name of Contributor:

**D-A-L Records** out of state PAC7 Amount of  
contribution (\$):**\$100.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

**Houston, TX 77219-**

9 Principal Occupation (Optional):

10 Employer (Optional):

4 Date

**9/10/2001**

5 Full Name of Contributor:

**Henry Brown** out of state PAC7 Amount of  
contribution (\$):**\$250.00**8 In kind  
contribution  
(if applicable):

6 Contributor Address: City, State, Zip Code

**Houston, TX 77004-**

9 Principal Occupation (Optional):

10 Employer (Optional):

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>9/10/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ira Mae Oville</b>	7 Amount of contribution (\$): <b>\$10.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/10/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Earl Gerhard</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77042-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/12/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Gertrude Barnstone</b>	7 Amount of contribution (\$): <b>\$10.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77006-3729</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/12/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Brian G. Smith</b>	7 Amount of contribution (\$): <b>\$500.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/13/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Bert Golding</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77063-1118</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>9/14/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ethel L Bell</b>	7 Amount of contribution (\$): <b>\$125.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-6317</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/14/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Christin Merritt</b>	7 Amount of contribution (\$): <b>\$75.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>, , TX</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/15/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Anne Lundy</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77004-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/15/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Rita J. Houston</b>	7 Amount of contribution (\$): <b>\$1,000.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77021-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/15/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Norma Rieza Benzon</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Sugar Land, TX 77479-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	

4 Date <b>9/15/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>M. Ernest McMillan</b>	7 Amount of contribution (\$): <b>\$30.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77020-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/17/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Ovide Duncantell</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77083-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/19/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Jean R Sutherland</b>	7 Amount of contribution (\$): <b>\$75.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Austin, TX 78759-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/20/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Fulbright &amp; Jaworski Tx. Committee</b>	7 Amount of contribution (\$): <b>\$1,000.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77010-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Patricia J. Walsh</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77006-1124</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A1**

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.	1 Total pages this schedule A1: <b>21</b>
2 FILER NAME: <b>Ada Edwards</b>	3 ACCOUNT # (Ethics Commission filers)

4 Date <b>9/22/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Gordon Anderson</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77077-5423</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/24/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>John M. Howard</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77009-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/24/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Eric C Botts</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77005-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/24/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Lawrence Marshall</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77288-0082</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/25/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Harris County Women's Political Caucus (HCWPC)</b>	7 Amount of contribution (\$): <b>\$700.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Baytown, TX 77521-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	

4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Annise Parker</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code <b>Houston, TX 77006</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Niko Niko's</b>	7 Amount of contribution (\$): <b>\$1,000.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code <b>Houston, TX 77006-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Robert L. Fleisher</b>	7 Amount of contribution (\$): <b>\$50.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code <b>Houston, TX 77019</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Rosa K Bounds</b>	7 Amount of contribution (\$): <b>\$250.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code <b>Houston, TX 77004-</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Tony Carroll</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
	6 Contributor Address: City, State, Zip Code <b>Houston, TX 77098</b>		
9 Principal Occupation (Optional):		10 Employer (Optional):	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A1**

(FOR FORMS C/OH and SPAC)

The Instruction Guide explains how to complete this form.		1 Total pages this schedule A1: <b>21</b>	
2 FILER NAME: <b>Ada Edwards</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <b>9/26/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>C.C. Lee</b>	7 Amount of contribution (\$): <b>\$100.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77074-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/27/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Bobby G Rouse</b>	7 Amount of contribution (\$): <b>\$35.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 77006-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/27/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Charlotte L. Avery</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Houston, TX 770083436</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	
4 Date <b>9/27/2001</b>	5 Full Name of Contributor: <input type="checkbox"/> out of state PAC <b>Robert D Finch</b>	7 Amount of contribution (\$): <b>\$25.00</b>	8 In kind contribution (if applicable):
6 Contributor Address: City, State, Zip Code [REDACTED] <b>Sugar Land, TX 77478-</b>			
9 Principal Occupation (Optional):		10 Employer (Optional):	

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# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages report: 3/6
<b>2</b> FILER NAME Ada Edwards		<b>3</b> ACCOUNT # (Ethics Commission files)
<b>4</b> Date 09/17/2001	<b>5</b> Payee name City of Houston, City Secretary	<b>7</b> Amount (\$) 506.00
<b>6</b> Payee address; City; State; Zip Code PO Box 1562 Houston TX 77002		
<b>8</b> Purpose of expenditure (See instructions regarding type of information required.) Filing Fee		<b>9</b> Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date 08/08/2001	Payee name Grant Martin Consulting	Amount (\$) 1150.00
Payee address; City; State; Zip Code P.O. Box 667307 Houston TX 77266		
Purpose of expenditure (See instructions regarding type of information required.) Printing & Reproduction		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date 07/05/2001	Payee name Tamara Jones	Amount (\$) 1540.39
Payee address; City; State; Zip Code 935 Fugate Houston TX 77009		
Purpose of expenditure (See instructions regarding type of information required.) Payroll		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
Date 07/19/2001	Payee name Tamara Jones	Amount (\$) 1540.39
Payee address; City; State; Zip Code 935 Fugate Houston TX 77009		
Purpose of expenditure (See instructions regarding type of information required.) Payroll		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:  
4/6**2** FILER NAME  
Ada Edwards**3** ACCOUNT # (Ethics Commission filers)**4** Date  
08/02/2001**5** Payee name  
Tamara Jones**7** Amount  
(\$)  
1540.39**6** Payee address; City; State; Zip Code  
935 Fugate  
Houston TX 77009**8** Purpose of expenditure (See instructions regarding type of information required.)  
Payroll**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held**Date**  
08/16/2001**Payee name**  
Tamara Jones**Amount**  
(\$)  
1540.39**Payee address; City; State; Zip Code**  
935 Fugate  
Houston TX 77009**Purpose of expenditure (See instructions regarding type of information required.)**  
Payroll**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
08/30/2001**Payee name**  
Tamara Jones**Amount**  
(\$)  
1540.39**Payee address; City; State; Zip Code**  
935 Fugate  
Houston TX 77009**Purpose of expenditure (See instructions regarding type of information required.)**  
Payroll**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
09/13/2001**Payee name**  
Tamara Jones**Amount**  
(\$)  
1540.39**Payee address; City; State; Zip Code**  
935 Fugate  
Houston TX 77009**Purpose of expenditure (See instructions regarding type of information required.)**  
Payroll**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.		<b>1</b> Total pages report: 5/6
<b>2</b> FILER NAME Ada Edwards		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date 09/27/2001	<b>5</b> Payee name Tamara Jones ..... <b>6</b> Payee address; City; State; Zip Code 935 Fugate Houston TX 77009	<b>7</b> Amount (\$) 1540.39
<b>8</b> Purpose of expenditure (See instructions regarding type of information required.) Payroll		<b>9</b> Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name      Office sought      Office held
<b>Date</b> 08/08/2001	<b>Payee name</b> NP Services ..... <b>Payee address; City; State; Zip Code</b> 1113 Vine Street Houston TX 77004	<b>Amount (\$)</b> 266.00
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Postage		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held
<b>Date</b> 08/10/2001	<b>Payee name</b> NP Services ..... <b>Payee address; City; State; Zip Code</b> 1113 Vine Street Houston TX 77004	<b>Amount (\$)</b> 1550.56
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Postage		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held
<b>Date</b> 07/02/2001	<b>Payee name</b> Nextel ..... <b>Payee address; City; State; Zip Code</b> 1800 West Loop South #1400 Houston TX 77027	<b>Amount (\$)</b> 121.82
<b>Purpose of expenditure (See instructions regarding type of information required.)</b> Telephone		<b>Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name      Office sought      Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
6/6**2** FILER NAME  
Ada Edwards**3** ACCOUNT # (Ethics Commission file)**4** Date  
07/02/2001**5** Payee name  
Shape Center**7** Amount  
(\$)  
225.00**6** Payee address; City; State; Zip Code  
3903 Alameda  
Houston TX 77004**8** Purpose of expenditure (See instructions regarding type of information required.)  
T-Shirts**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
08/09/2001Payee name  
Tweedy ScreenworksAmount  
(\$)  
2435.63Payee address; City; State; Zip Code  
1302 Mabry Mill Rd  
Houston TX 77062Purpose of expenditure (See instructions regarding type of information required.)  
Yard SignsComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
08/09/2001Payee name  
Tweedy ScreenworksAmount  
(\$)  
82.27Payee address; City; State; Zip Code  
1302 Mabry Mill Rd  
Houston TX 77062Purpose of expenditure (See instructions regarding type of information required.)  
Yard SignsComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
08/16/2001Payee name  
XpedexAmount  
(\$)  
71.04Payee address; City; State; Zip Code  
2201 Taylor  
Houston TX 77007Purpose of expenditure (See instructions regarding type of information required.)  
Card StockComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held