

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:

28 PAGES

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr. John W
NICKNAME LAST SUFFIX
Elford

OFFICE USE ONLY

Date Received

Date Handled or Filed or Delivered Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 571733, Houston, TX 77257

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 266-4695

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr. Philip J.
NICKNAME LAST SUFFIX
Kunetka

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
5611 Edith, Houston, TX 77081

(Residence or business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(713) 667-9927

9 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)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
7 / 1 / 2003 THROUGH 9 / 30 / 2003

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
11 / 4 / 2003
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Hou. City Council, At-Large 2

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME

John Elford for Houston City Council At-Large Place 2

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

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

\$

\$22,525.00

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$

\$18,060.58

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

OUTSTANDING LOAN TOTALS

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

\$

\$6,684.52

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said JOHN ELFORD this the 6 day of OCTOBER 2003, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

CHRISTINE MCCABE
Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 1-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date July 1, 2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Lusk	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date July 1, 2003	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry Glauser	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOID Go to Next Page	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOID Go to Next Page	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOID Go to Next Page	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

2-11

2 FILER NAME

John Elford for Houston Council, At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

July 6, 2003

5 Full name of contributor out-of-state PAC (ID#: _____)

J. Greg Letsos

6 Contributor address; City; State; Zip Code

[REDACTED]

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

July 9, 2003

Full name of contributor out-of-state PAC (ID#: _____)

Hollis Tautenhahn

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

July 10, 2003

Full name of contributor out-of-state PAC (ID#: _____)

Dionel Avilies

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

July 10, 2003

Full name of contributor out-of-state PAC (ID#: _____)

Thomas Owens

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

750.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

July 14, 2003

Full name of contributor out-of-state PAC (ID#: _____)

Russell Frankel

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 3-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date July 14, 2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME PAC	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 			
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date July 17, 2003	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME PAC	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date July 24, 2003	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C-Club PAC	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code HOUSTO 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date July 28, 2003	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Fadrique	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date July 28, 2003	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R.T. Herrin	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

4 - 11

2 FILER NAME

John Elford for Houston Council, At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/30/03

5 Full name of contributor out-of-state PAC (ID#: _____)

A. G. Bauguss

6 Contributor address; City; State; Zip Code

[REDACTED]

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

7/30/03

Full name of contributor out-of-state PAC (ID#: _____)

David Tritter

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

7/30/03

Full name of contributor out-of-state PAC (ID#: _____)

Jeff Tritter

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

7/30/03

Full name of contributor out-of-state PAC (ID#: _____)

Kimberly Randle

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

07/30/03

Full name of contributor out-of-state PAC (ID#: _____)

Larry Hill

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

5-11

2 FILER NAME

John Elford for Houston Council, At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

7/30/03

5 Full name of contributor out-of-state PAC (ID#: _____)

Russell & Maria Moses

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

7/30/03

Full name of contributor out-of-state PAC (ID#: _____)

Tamara & David Kemp

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/07/03

Full name of contributor out-of-state PAC (ID#: _____)

R-Club PAC

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/12/03

Full name of contributor out-of-state PAC (ID#: _____)

Alvin Coffey

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/12/03

Full name of contributor out-of-state PAC (ID#: _____)

HOME PAC

Contributor address; City; State; Zip Code

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 6-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date 8/13/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Quinlan	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 			
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/13/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emilie Booth	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 8/13/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harold Wallace	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 8/13/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Brent Binkley	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 8/13/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joan Lyons	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

7-11

2 FILER NAME

John Elford for Houston Council, At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

8/13/03

5 Full name of contributor out-of-state PAC (ID#: _____)

Lester Allison

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

08/13/03

Full name of contributor out-of-state PAC (ID#: _____)

Melanie Edmundson

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/13/03

Full name of contributor out-of-state PAC (ID#: _____)

Robert Parsley

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/14/03

Full name of contributor out-of-state PAC (ID#: _____)

A.L. Keller

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

8/14/03

Full name of contributor out-of-state PAC (ID#: _____)

Glen & Phyllis Dorflinger

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

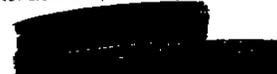
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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



**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 8-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date 8/14/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Boylan	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 			
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/22/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Hotze	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/03/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman Adams	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Realty Breakfast Club PAC	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/11/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brad Fish	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 9-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/11/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennie Moroney	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code [REDACTED]			
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/15/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall Miller	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code [REDACTED]			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/16/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wilson	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code [REDACTED]			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/17/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Rushing	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code [REDACTED]			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/17/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAC PAC	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code [REDACTED]			
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A:

10-11

2 FILER NAME

John Elford for Houston Council, At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

9/18/03

5 Full name of contributor out-of-state PAC (ID#: _____)

Ed Lester

6 Contributor address; City; State; Zip Code

[REDACTED]

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

9/18/03

Full name of contributor out-of-state PAC (ID#: _____)

Ron Woliver

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

9/18/03

Full name of contributor out-of-state PAC (ID#: _____)

3 D/I Pac

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

300.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

9/20/03

Full name of contributor out-of-state PAC (ID#: _____)

Kerr & Jim Taylor

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

9/23/03

Full name of contributor out-of-state PAC (ID#: _____)

Weldon Smith

Contributor address; City; State; Zip Code

[REDACTED]

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 11-11	
2 FILER NAME John Elford for Houston Council, At-Large 2		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/24/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders & Contractors PAC 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/29/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Leggett Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 9/30/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Craig Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 8/29/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn Zarr Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/03	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed White Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:
1 of 15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date 07/01/03	5 Payee name Office Depot	7 Amount (\$) 34.22
6 Payee address; City; State; Zip Code 7519 Westheimer, Houston, TX 77063		

8 Purpose of payment (See instructions regarding type of information required.) Invitation Materials	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 07/02/03	Payee name Kinkos	Amount (\$) 17.32
Payee address; City; State; Zip Code 5616 Westheimer, Houston, TX 77056		

Purpose of payment (See instructions regarding type of information required.) Copies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 07/03/03	Payee name Houston Contractors Assoc.	Amount (\$) 25.00
Payee address; City; State; Zip Code 4001 Sherwood, Houston, TX 77092		

Purpose of payment (See instructions regarding type of information required.) Monthly Meeting Luncheon	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 07/09/03	Payee name Maggiano's	Amount (\$) 55.79
Payee address; City; State; Zip Code 2019 Post Oak Blvd., Houston, TX		

Purpose of payment (See instructions regarding type of information required.) Lunch Dave Tritter, Scott Ellis	** 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:

2 - 15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
07/09/03

5 Payee name

US Postal Service

6 Payee address: City; State; Zip Code

2950 Unity Dr, Houston, TX 77057

7 Amount (\$)

37.00

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

Stamps

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date
07/15/03

Payee name

Houston Hispanic Chamber of Commerce

Payee address: City; State; Zip Code

2900 Woodridge, Houston, TX 77087

Amount (\$)

175.00

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

Event Booth

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date
07/16/03

Payee name

Kinkos

Payee address: City; State; Zip Code

2200 Greenbriar, Houston, TX 77098

Amount (\$)

4.50

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

Copies

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date
07/17/03

Payee name

Phil KUNETKA

Payee address: City; State; Zip Code

5611 Edith, Houston, TX 77081

Amount (\$)

500.00

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

Consulting Fees

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

3-15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
07/17/03

5 Payee name

Harris County Republican Party

6 Payee address; City; State; Zip Code

Harris Co. GOP, 3311 Richmond, Houston, TX 77098

7 Amount (\$)

85.00

8 Purpose of payment (See instructions regarding type of information required.)
San Jacinto Club Dues

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

Date
07/17/03

Payee name
Kinko's

Payee address; City; State; Zip Code

5616 Westheimer, Houston, TX 77056

Amount (\$)

4.33

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

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

Date
07/21/03

Payee name
Kinkos

Payee address; City; State; Zip Code

4834 Beechnut, Houston, TX 77096

Amount (\$)

0.09 cent

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

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

Date
07/23/03

Payee name
Hobby Lobby

Payee address; City; State; Zip Code

8715 W. Loop South

Amount (\$)

14.87

Purpose of payment (See instructions regarding type of information required.)
Sign and Invitation Materials

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES		SCHEDULE F
The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 4-15
2 FILER NAME John Elford for Houston City Council At-Large 2		3 ACCOUNT # (Ethics Commission filers)
4 Date 07/23/03	5 Payee name Kinkos <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 4834 Beechnut, Houston, TX 77096	7 Amount (\$) 5.89
8 Purpose of payment (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 0724/03	Payee name Sprint Digital, Inc. <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 10100 W. Clay Rd, Ste. C, TX 77080	Amount (\$) \$2,165.00
Purpose of payment (See instructions regarding type of information required.) Campaign Signs		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 07/24/03	Payee name Printing Communications, Inc <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 5601 Central Crest, Houston, TX 77092	Amount (\$) 750.18
Purpose of payment (See instructions regarding type of information required.) Printing		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 07/23/03	Payee name John Elford <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 1818 Augusta, #13, Houston, TX 77057	Amount (\$) 505.92
Purpose of payment (See instructions regarding type of information required.) Re-imburse for ATT & SWB Phone Bills		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

5-15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date 07/30/03	5 Payee name Phil Kunetka	7 Amount (\$) 1000.00
6 Payee address; City; State; Zip Code 5611 Edith, Houston, TX 77081		

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
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Date 07/30/03	Payee name Office Depot	Amount (\$) 157.46
Payee address; City; State; Zip Code 6904 SW Frwy, Houston, TX 77074		

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

Date 07/30/03	Payee name Office Depot	Amount (\$) 19.49
Payee address; City; State; Zip Code 10217 Katy Frwy, TX 77024		

Purpose of payment (See instructions regarding type of information required.) Invitations	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 08/01/03	Payee name Office Depot	Amount (\$) 104.72
Payee address; City; State; Zip Code 7519 Westheimer, Houston, TX 77063		

Purpose of payment (See instructions regarding type of information required.) Printing/Copies	** 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: 6-15
2 FILER NAME John Elford for Houston City Council At-Large 2		3 ACCOUNT # (Ethics Commission filers)
4 Date 08/04/03	5 Payee name US Postal Service 6 Payee address; City; State; Zip Code 2950 Unity, Houston, TX 77057	7 Amount (\$) 259.00
8 Purpose of payment (See instructions regarding type of information required.) Invitation Postage		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 08/07/03	Payee name Texas Eagle Forum Payee address; City; State; Zip Code PO Box 795354, Dallas, TX 753794	Amount (\$) 100.00
Purpose of payment (See instructions regarding type of information required.) Event Registration		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 08/07/03	Payee name US Postal Service Payee address; City; State; Zip Code 2950 Unity, Houston, TX 77057	Amount (\$) 34.00
Purpose of payment (See instructions regarding type of information required.) PO Box Rent		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 08/13/03	Payee name Montalbano Lumber Payee address; City; State; Zip Code 1309 Houston Ave., Houston, TX 77007	Amount (\$) 283.92
Purpose of payment (See instructions regarding type of information required.) Sign Supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

7-15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
08/13/03	US Postmaster	
	6 Payee address; City; State; Zip Code	
	2950 Unity, Houston, TX 77057	37.00

8 Purpose of payment (See instructions regarding type of information required.) Stamps	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
08/13/03	Lowe's Hardware	9.34
	Payee address; City; State; Zip Code	100.00
	4645 Beechnut, Houston, TX 77096	

Purpose of payment (See instructions regarding type of information required.) Sign Supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
08/15/03	Candy Massoud Catering	849.50
	Payee address; City; State; Zip Code	
	1536 Tulane, Houston, TX 77008	

Purpose of payment (See instructions regarding type of information required.) Fundraiser Catering	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
08/15/03	Kinko's	12.99
	Payee address; City; State; Zip Code	
	5616 Westheimer, Houston, TX 77056	

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

8.15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
08/18/03

5 Payee name
Harris Co. Republican Party

7 Amount (\$)

6 Payee address; City; State; Zip Code
3311 Richmond, Houston, TX 77098

85.00

8 Purpose of payment (See instructions regarding type of information required.)
San Jac Club Monthly Dues

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

Date
08/18/03

Payee name
Kinko's

Amount (\$)

Payee address; City; State; Zip Code
5616 Westheimer, Houston, TX 77056

.43 cents

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

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

Date
08/19/03

Payee name
Phil Kunetka

Amount (\$)

Payee address; City; State; Zip Code
5611 Edith, Houston, TX 77081

750.50

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

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

Date
08/19/03

Payee name
Buffalo Grille

Amount (\$)

Payee address; City; State; Zip Code
1301 Voss, Houston, TX 77055

13.30

Purpose of payment (See instructions regarding type of information required.)
Planning Meeting/Breakfast

** 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:

9-15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
08/21/03

5 Payee name
Sibley Cooley
6 Payee address; City; State; Zip Code
10878 Westheimer, Suite 330, Houston, TX 77042

7 Amount (\$)
400.00

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

Sponsorship League of Military & Veteran Veterans National Anthem Flyer

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

Date
08/22/03

Payee name
Harris County Republican Party
Payee address; City; State; Zip Code
3311 Richmond, Houston, TX 77098

Amount (\$)
50.00

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

Mailing Lists

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

Date
08/22/03

Payee name
Larry Hord Delivery Service
Payee address; City; State; Zip Code
11510 Rowan Ln., Houston, TX 77072

Amount (\$)
25.00

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

Delivery

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

Date
08/25/03

Payee name
John Elford
Payee address; City; State; Zip Code
1818 Augusta, Houston, TX 77057

Amount (\$)
790.00

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

Mileage, Parking Expenses and Event luncheon Re-imbusement.

** 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:

10-15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
08/26/03

5 Payee name
Phil Kunetka
6 Payee address; City; State; Zip Code
5611 Edith, Houston, TX 77081

7 Amount (\$)
1500.00

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

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

Date
08/28/03

Payee name
Office Depot
Payee address; City; State; Zip Code
7519 Westheimer, Houston, TX 77063

Amount (\$)
46.18

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

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

Date
08/29/03

Payee name
ATT Wireless
Payee address; City; State; Zip Code
5000 Westheimer, Ste 108, Houston, TX 77056

Amount (\$)
298.61

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

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

Date
08/29/03

Payee name
Conservative Republicans of Harris Co.
Payee address; City; State; Zip Code
3323 Richmond,, Houston, TX 77098

Amount (\$)
2000.00

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

** 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:

11-15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
09/02/03

5 Payee name
Michael Berry for Mayor

7 Amount (\$)

6 Payee address; City; State; Zip Code
223 Westheimer, Houston, TX 7700681

101.00

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

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

Date
09/09/03

5 Payee name
Printing Communications, Inc
Payee address; City; State; Zip Code

7 Amount (\$)

5601 Central Crest, Houston, TX 77092

512.75

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

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

Date
09/10/03

5 Payee name
Harris County Republican Party
Payee address; City; State; Zip Code
3311 Richmond, Houston, TX 77098

7 Amount (\$)

150.00

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

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

Date
09/11/03

5 Payee name
Southbelt Ellington Chamber of Commerce.
Payee address; City; State; Zip Code
11555 Beamer, Ste 500 Houston, TX 77089

7 Amount (\$)

12.00

8 Purpose of payment (See instructions regarding type of information required.)
Luncheon Event and Forum

9 ** 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: 12-15
2 FILER NAME John Elford for Houston City Council At-Large 2		3 ACCOUNT # (Ethics Commission filers)
4 Date 09/15/03	5 Payee name Scott D. Ellis 6 Payee address; City; State; Zip Code 1973 W. Clay, Houston, TX 77019	7 Amount (\$) 200.00
8 Purpose of payment (See instructions regarding type of information required.) Consulting Fee – Student Outreach Coordinator		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 09/15/03	Payee name Harris County Republican Party Payee address; City; State; Zip Code 3311 Richmond, Houston, TX 77098	Amount (\$) 150.00
Purpose of payment (See instructions regarding type of information required.) Golf Tourney Participation		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 09/16/03	Payee name John Elford Payee address; City; State; Zip Code 1818 Augusta, #13, Houston, TX 7705798	Amount (\$) 837.21
Purpose of payment (See instructions regarding type of information required.) Re-Imburse Expenses. Camera Digital Cable & DSC (86.57), Mileage (301.50), Meals (Lusk, Glauser, Mecom 101.50), ATT (144.68), SWB (202.96)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 09/15/03	Payee name Office Depot Payee address; City; State; Zip Code 7519 Westheimer, Houston, TX 77063	Amount (\$) 8.74
Purpose of payment (See instructions regarding type of information required.) Flyer Copies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages, Schedule F:

13-15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date

09/17/03

5 Payee name

Harris County Republican Party

6 Payee address; City; State; Zip Code

3311 Richmond, Houston, TX 77098

7 Amount (\$)

85.00

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

San Jac Club Dues

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

Date

09/18/03

Payee name

City of Houston -- Mayors Office
Payee address; City; State; Zip Code

PO Box 1562, Houston, TX 77251

Amount (\$)

503.00

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

Council Filing Fee

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

Date

09/18/03

Payee name

St. Pete's Dancing Marlin

Payee address; City; State; Zip Code

300 Main, Houston, TX 77001

Amount (\$)

25.17

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

Lunch Kunetka, Catarina Gonzalez

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

Date

09/22/03

Payee name

Sprint Digital.

Payee address; City; State; Zip Code

10100 Clay Rd, Ste C, Houston, TX 77080

Amount (\$)

2219.13

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

Campaign Signs

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

14-15

2 FILER NAME John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
09/22/03

5 Payee name
Phil Kunetka
6 Payee address; City; State; Zip Code
5611 Edith, Houston, TX 77081

7 Amount (\$)
750.00

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

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

Date
09/26/03

Payee name
Steve Schmid Photography
Payee address; City; State; Zip Code
3939 Essex, Houston, TX 7727

Amount (\$)
163.570

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

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

Date
09/29/03

Payee name
Drexler's BBQ
Payee address; City; State; Zip Code
2300 Pierce St, Houston, TX 77003

Amount (\$)
59.00

Purpose of payment (See instructions regarding type of information required.)
Lunch Meeting, C.L. Jackson, Bobby Mills, Elford, Kunetka

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

Date
09/30/03

Payee name
Target
Payee address; City; State; Zip Code
4323 San Felipe, Houston, TX 77027

Amount (\$)
58.62

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

15-15

2 FILER NAME

John Elford for Houston City Council At-Large 2

3 ACCOUNT # (Ethics Commission filers)

4 Date
09/30/03

5 Payee name

Home Depot

7 Amount (\$)

6 Payee address; City; State; Zip Code

5445 West Loop 610, Houston, TX 77081

29.73

8 Purpose of payment (See instructions regarding type of information required.)
Sign Installation Material

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date
08/13/03

Payee name

Correlli's

Amount (\$)

Payee address; City; State; Zip Code

5640 Westheimer, Houston, TX 77056

62.22

Purpose of payment (See instructions regarding type of information required.)
Student Outreach Meeting w Scott Ellis

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

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

Amount (\$)

Payee address; City; State; Zip Code

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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