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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers): 2

2 Total pages this report: 1/32

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Mark | MI
NICKNAME | LAST: Ellis | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: 7915 Leader
APT / SUITE #:
CITY: Houston
STATE: TX
ZIP CODE: 77036

☐ Change of Address

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Philip R | MI
NICKNAME | LAST: Lehmberg | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2700 Post Oak Blvd
APT / SUITE #: Suite 200
CITY: Houston
STATE: TX
ZIP CODE: 77056

7 CAMPAIGN TREASURER PHONE

AREA CODE: (713)
PHONE NUMBER: 892-4821
EXTENSION:

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 09/26/2003 THROUGH Month Day Year: 10/25/2003

10 ELECTION

ELECTION DATE Month Day Year: 11/04/2003

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Other -- Houston City Council- - Dist F

12 OFFICE SOUGHT (if known): Other -- Houston City Council at Large Pos #1

13 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

OFFICE USE ONLY

Date Received: RECEIVED OCT 27 2003 CITY SECRETARY

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Mark Ellis

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. ••

☐ additional pages

COMMITTEE TYPE	
☐ GENERAL	COMMITTEE NAME
☐ SPECIFIC	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	$ 0.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 57260.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
4.	**TOTAL POLITICAL EXPENDITURES**	$ 119048.05

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 16906.00

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

DEBORA L. ELLIS NOTARY PUBLIC STATE OF TEXAS EXPIRES 03-05-2007

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.

Mark Ellis
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mark Ellis, this the 27th day of October, 2003, to certify which, witness my hand and seal of office.

Debra L Ellis — Signature of officer administering oath
Debora L. Ellis — Printed name of officer administering oath
Notary — Title of officer administering oath

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/29/2003	Adams Insurance Service [redacted]	1000.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/2003	Willie J Alexander [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/09/2003	Allen Boone Humphries LLP [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/2003	Ross C Allyn [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2003	Inas M Aweidah [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation (Optional)	10 Employer (Optional)
10/01/2003	David Bearden [redacted]	500.00			
10/01/2003	Daniel or Beth Bellow [redacted]	500.00			
10/14/2003	Larry Berkman [redacted]	250.00			
09/28/2003	James E or Kristin D Boozer [redacted]	50.00			
10/15/2003	James C Box [redacted]	250.00			

Revised 12/01/1999

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers) 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/21/2003	Bracewell & Patterson Committee [redacted]	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Sally L Bradford [redacted]	25.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Gerald M Brady [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Gerald M Brady [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/10/2003	Cathy K or Jesse C Brown II [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/02/2003	Tim D or LaRue Dove Brown [redacted]	10.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Rudolph H Bruhns [redacted]	1500.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	CDMPAC [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Mark R or Stacey L Clark [redacted]	1000.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/10/2003	Cindy L Clifford [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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1 Total pages this report: 7/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/21/2003	Robert B or Harriet Cohen [redacted]	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2003	Continental Airlines Inc/Employee Fund for a Better America PAC [redacted]	500.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/22/2003	M Algenita Scott or Martha Althea Davis [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/2003	George A Demontrond,III [redacted]	500.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/30/2003	Ty J Donahoe [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/08/2003	Tilman or Paige Fertitta [redacted]	1000.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2003	William or Pat Fowler [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2003	Paul M or Barbara L Frison [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/07/2003	Gilbert A or Deana Pena- Garcia [redacted]	150.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/07/2003	George or Gloria L Gee [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/22/2003	Vivian Gonzalez or Alejandro C Giannotti [redacted]	150.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2003	Gregg & Gregg PC [redacted]	50.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2003	Kurt M Gumberger [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/06/2003	Louis Gusemano [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/06/2003	Wendell Hearne [redacted]	50.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers) 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/29/2003	Art or Louise Helms [redacted]	150.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/2003	William D Henson [redacted]	1000.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2003	Howard J or Frances Ann Hicks [redacted]	25.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/24/2003	William J Hill [redacted]	1000.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/01/2003	Holladay Lasik Institute,PA [redacted]	500.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/20/2003	Ned S Holmes [redacted]	4000.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/29/2003	Home-PAC/Greater Houston Builders Association [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Houston Associated General Contractors PAC [redacted]	2000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Houston Fire Fighters Political Action Fund [redacted]	2000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	Williard L Jackson Jr. [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/29/2003	Steven A Jarvis [redacted] Houston, TX [redacted]	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/28/2003	A.L. Keller [redacted]	50.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	Stuart Kensinger [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional) Kensinger & Co.	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Hemachandra Prasad Kolluru [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Floyd or Lara Kowalski [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

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1 Total pages this report: 13/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/08/2003	Lam Wang & Lyn,Attorneys at Law [redacted]	100.00	
9 Principal occupation (Optional)	**10 Employer (Optional)**		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Landry's Restaurants,PAC [redacted]	1000.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/26/2003	Keith Lawyer [redacted]	1000.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Chi-Mei Hua Lin [redacted]	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Robert C Livingston [redacted]	100.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/09/2003	Larry G Longer / [redacted]	200.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/2003	Joseph E or Catherine A Lorino / [redacted]	50.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/01/2003	Amelia A Lyons / [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/2003	David W or Debra K Mc Kinney / [redacted]	2500.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/22/2003	Ben S or Valerie McMillan / [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/20/2003	Robert C McNair [redacted]	1500.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Jesus E Marin or Dina A Medley [redacted]	50.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	David A Grimes or Karen T Menzies [redacted]	50.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	John J or Angela M Montalbano [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/01/2003	John L or Barbara B Nau,III [redacted]	2500.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/21/2003	Mark or Shannon Nini [redacted]	1000.00	

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

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Mark C Nitcholas [redacted]	200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/30/2003	James R or Joye O ODonnel [redacted]	50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	OUTDOOR P.A.C. [redacted]	500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	OUTDOOR P.A.C. [redacted]	500.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/02/2003	PageSoutherlandPage LLP [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/03/2003	John W Peavy [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Peter C or Maureen Peltier [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Brent C or Carole W Perry [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/29/2003	James L or Kaylon Phillips [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 18/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/02/2003	Stephen B Pohl [redacted]	200.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	Rodney M Porter [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/07/2003	Charles L or Jeanette H Rash,Sr [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Reliant Resources,Inc PAC [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Glenn L or Rebecca Rex [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 19/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/22/2003	Cora Quinn Robinson [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	James Berry Russ [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2003	Verdene B Ryder [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	S&B PAC [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/07/2003	SIMA of Houston [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 20/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation (Optional)	10 Employer (Optional)
10/10/2003	Loree Ann Shanon [redacted]	500.00			
09/26/2003	Charles W Shears [redacted]	1000.00			
10/21/2003	Barry E Silverman [redacted]	500.00			
10/15/2003	Brian G Smith [redacted]	1000.00			
10/02/2003	Rhonda Lee Smith [redacted]	100.00			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 21/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/02/2003	Barry or Marijane Smitherman [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/30/2003	John Speer [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2003	Michael S Stevens [redacted]	2500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/15/2003	John F or Sandra K Struska [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Michael or Kay L Surface [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 22/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/29/2003	TSC Fund [redacted]	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	TX Friends of Time Warner Cable [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/21/2003	Henry J.N. Taub [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Orlando J Teran [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2003	Charles G Untermeyer [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 23/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/22/2003	Uptown Houston PAC / [redacted]	500.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Vinson & Elkins PAC / [redacted]	1000.00	

Principal occupation (Optional)	Employer (Optional)
Attorneys	Vinson & Elkins PAC

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/02/2003	Barron F or Lisa M Wallace / [redacted]	100.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/23/2003	Maxine Westberry / [redacted]	50.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/14/2003	Gerald or Marsherria Wilson / [redacted]	1000.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 24/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/06/2003	Leonard S Wolowiec [redacted]	500.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2003	Gilbert Russell or Monica M Ybarra [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/08/2003	Wellington D Yu [redacted]	250.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 25/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)	8 Purpose of expenditure (See instructions regarding type of information required.)	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
09/30/2003	A&E Products,Inc P.O. Box 27286 Houston TX 77227	1526.81	Signs:Yard Signs & 4 x 8's	
10/10/2003	A&E Products,Inc P.O. Box 27286 Houston TX 77227	105.54	Fundraising:Invitations	
09/30/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	2500.00	Consulting	
10/06/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	5500.00	Electronic Media:Television Production	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 26/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/15/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	21.75

8 Purpose of expenditure (See instructions regarding type of information required.)
Administrative:Couriers

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/21/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	4000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/03/2003	Brisket House #4 Houston TX	33.12

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/2003	Cingular P.O. Box 27717 Houston TX 77227	161.75

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Cell Phone

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: 27/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/03/2003	Copperfield 6518 Westheimer Houston TX 77057	103.53

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Misc - Sign Party

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/03/2003	Domino's 11107 Bellaire Blvd Houston TX 77072	22.98

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/2003	Debbie Ellis 3405 Edloe St Ste 360 Houston TX 77027	10.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/02/2003	Everready Lodge 429 West Ave Rosenberg TX 77471	250.00

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

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 report: 28/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission Filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/10/2003	Martha Galvan 1123 Gardendale Houston TX 77018	75.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Meals

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/24/2003	Ralph Garcia 2810 Leeland St Houston TX 77003	575.00

Purpose of expenditure (See instructions regarding type of information required.)
Signs:Yard Sign - 4x8's

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/06/2003	Tricia Gernand 1401 Richmond #314 Houston TX 77006	50.00

Purpose of expenditure (See instructions regarding type of information required.)
Misc. Communications:T-Shirt Logo

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/2003	Tricia Gernand 1401 Richmond #314 Houston TX 77006	50.00

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

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 report: 29/32

2 FILER NAME: Mark Ellis

3 ACCOUNT # (Ethics Commission filers): 2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/16/2003	Home Depot 5445 W Loop South Houston TX 77081	18.91

8 Purpose of expenditure (See instructions regarding type of information required.): Signs:Yard Sign - Materials

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/04/2003	Kinko's 2200 Southwest Freeway Houston TX 77098-4710	711.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/30/2003	MCCC 2003 P.O. Box 41883 Houston TX 77241-1883	150.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/06/2003	Minuteman Press 50 Briar Hollow Lane Ste 180 West Houston TX 77027	5301.14

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

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: 30/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/02/2003	Pamela Baity & Associates 9613 Kinder Houston TX 77051	2500.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	3990.10

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/16/2003	Sandler & Innocenzi 705 Prince St Alexandria VA 22314	59960.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/23/2003	Sandler & Innocenzi 705 Prince St Alexandria VA 22314	15365.00

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

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 report: 31/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/06/2003	T. Mac Designs 2723 Werlein Houston TX 77005	850.85

8 Purpose of expenditure (See instructions regarding type of information required.)
Misc. Communications: T-Shirts

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

Date	Payee name / Payee address: City: State: Zip Code	Amount ($)
10/06/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	541.25

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/10/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	1190.75

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact

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

Date	Payee name / Payee address: City: State: Zip Code	Amount ($)
09/30/2003	WC Management 402 West 16th St Houston TX 77008	1467.07

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

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 report: 32/32

2 FILER NAME
Mark Ellis

3 ACCOUNT # (Ethics Commission filers)
2

4 Date	**5** Payee name	**7** Amount ($)
10/07/2003	WC Management	12016.50
	6 Payee address; City; State; Zip Code 402 West 16th St Houston TX 77008	

8 Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact

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

Revised 11/12/1999