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): 4

2 Total pages this report: 1/17

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Antoinette | MI: B

NICKNAME: Toni | LAST: Lawrence | SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: 7047 Bent Branch Dr | APT / SUITE #: | CITY: Houston | STATE: TX | ZIP CODE: 77088

☐ Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: Mr. | FIRST: George | MI: D

NICKNAME: | LAST: Franklow | SUFFIX: Jr.

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2618 Sutton Ct | APT / SUITE #: | CITY: Houston | STATE: TX | ZIP CODE: 77027

7 CAMPAIGN TREASURER PHONE

AREA CODE: (713) | PHONE NUMBER: 552-0838 | EXTENSION:

8 REPORT TYPE

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

9 PERIOD COVERED

Month Day Year: 10/26/2003 THROUGH Month Day Year: 12/31/2003

10 ELECTION

ELECTION DATE (Month Day Year):

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

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

12 OFFICE SOUGHT (if known)

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 JAN 15 2004 CITY SECRETARY

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: Antoinette B Lawrence

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
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

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)	$ 28175.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
4.	**TOTAL POLITICAL EXPENDITURES**	$ 27454.69

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 34956.70

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.

Antoinette B. Lawrence
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Antoinette B. Lawrence this the 14th day of January, 2004, to certify which, witness my hand and seal of office.

Debora 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: 3/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/27/2003	Sabir Muhammad Amawi [redacted]	300.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/28/2003	American Federaltion of St.,County & Municipal Employees [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 ($)	In-kind contribution description (if applicable)
11/19/2003	Beirne,Maynard & Parsons,LLP [redacted]	2500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Beirne,Maynard & Parsons,LLP [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)
12/31/2003	Beirne,Maynard & Parsons,LLP [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: 4/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/01/2009	Dwayne Bohac [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/20/2009	Gerald M Brady [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 ($)	In-kind contribution description (if applicable)
12/29/2009	J Carter Breed [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/31/2009	Mr. & Mrs Ray Bush [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)
12/01/2009	Paul A Cagle [redacted]	800.00	
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: 5/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/29/2003	Continental Airlines,Inc.Employee Fund for a Better America PAC [redacted]	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/23/2003	Easton Disbursement Acct [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/2[redacted]	C.M. Garver [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/28/20[redacted]	H Lee Godfrey [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/200[redacted]	H A A Better Government Fund [redacted]	3000.00	
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: 6/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/27/2003	James T or Maureen Hackett [redacted] State; Zip Code	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
11/13/2003	Randal M Hall [redacted] City; State; Zip Code	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	Hartman Partnership LP [redacted] State; Zip Code	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/30/2003	Susan H or David D Helterbran [redacted] State; Zip Code	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
12/29/2003	Susan H or David D Helterbran [redacted] City; State; Zip Code	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: 7/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/13/200	Home-PAC [redacted]	1000.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/14/2003	Hou-Can 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 ($)	In-kind contribution description (if applicable)
12/30/2003	Houston Associates General Contractors PAC [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	Houston Police Retired Officers Assoc. 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)
10/29/2003	James B Humphrey Jr. [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: 8/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/30/2003	Carole Kilpatrick [redacted] City; State; Zip Code	50.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
12/22/2003	Kay Lentz [redacted] City; State; Zip Code	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/29/2003	Robert C or Grace P Lin [redacted] City; State; Zip Code	200.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
11/24/2003	Locke Liddell & Sapp,LLP [redacted] City; State; Zip Code	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/30/2003	Richard C or Sherrie E Lowe [redacted] City; State; Zip Code	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: 9/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/31/2003	Harry Mach [redacted]	200.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/22/2003	Staman or Beverly Ogilvie [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/07/2003	Reliant Resources,Inc PAC [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/30/2003	Glenn L or Rebecca Rex [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	Seafarers Political Activity [redacted]	500.00	
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: 10/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/27/2003	Carol Sellers [redacted] State; Zip Code	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	Kevin or Evelyn Shanley [redacted] City; State; Zip Code	250.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	Clyde Elton or Lee Etta Sloan [redacted] City; State; Zip Code	25.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
12/08/2003	TSC Fund [redacted] City; State; Zip Code	200.00	

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/31/2003	Laura or Charlie Thorp [redacted] City; State; Zip Code	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: 11/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/30/2003	Kenneth W Ulmer 6[redacted] State; Zip Code 1[redacted] H[redacted]	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/26/2003	Dr Arun Verma [redacted] State; Zip Code	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/30/2003	Westchase PAC [redacted] State; Zip Code	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
11/01/2003	David B Wilson [redacted] City; State; Zip Code	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
11/03/2003	Jason Yoo [redacted] City; State; Zip Code	1000.00	
Principal occupation (Optional)		Employer (Optional)	

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 12/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/28/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	7308.93

8 Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact #4

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/05/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	1754.51

Purpose of expenditure (See instructions regarding type of information required.)
Consult-1000DirectMail-688.24Admin:Courier-66.27

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/06/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	3000.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/23/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	1278.44

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 13/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

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
10/31/2003	Martha Greenlaw 9209 Stagecoach Dr Houston TX 77041	1000.00	Campaign Work	
12/02/2003	Martha Greenlaw 9209 Stagecoach Dr Houston TX 77041	188.57	Stamps/Name Tags	
12/01/2003	LT Communications 2606 Persa Houston TX 77098	400.00	Fundraiser	
10/31/2003	Sharon Martin 10670 Northbrook Houston TX 77043	1000.00	Campaign Work	

Revised 11/12/1999

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 14/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

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
11/06/2003	Debbie Robbins 22950 Indian Ridge Dr Katy TX 77450	100.00	Campaign Work	
11/05/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	4779.24	Printing of Mailers	
11/06/2003	Greg Shaw 800 Colquitt Houston TX 77006	3000.00	Campaign Work	
11/16/2003	Greg Shaw 800 Colquitt Houston TX 77006	300.00	Phone Bill	

Revised 11/12/1999

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 15/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/30/2003	Tange Mann & Garza 1415 N Loop West #210 Houston TX 77008	321.00

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
Financial Disclosure Statement	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/05/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	1732.00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/05/2003	WC Management 402 West 16th Street Houston TX 77008	211.82

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/01/2003	Jimmy Wong Houston TX 77015	283.36

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 16/17

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/04/2003	Sunny Yarbourough 387 Connaught Way Houston TX 77015	100.00

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
Campaign Work	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/16/2003	Sunny Yarbourough 387 Connaught Way Houston TX 77015	100.00

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

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 17/18

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($) / Reimbursement from political contributions intended
10/29/2003	Allright Parking 801 Travis Houston TX 77002 Officeholder:Misc-Parking	6.00 [X]
12/12/2003	Cilantro's 5535 Memorial Dr Houston TX 77007 Public Relations:Meals	31.30 [X]
12/13/2003	Homestyle Buffet 8203 Long Point Houston TX 77055 Public Relations:Meals	35.42 [X]
11/04/2003	Kinko's 10670 Northwest Freeway Houston TX 77092 Officeholder:Office Supplies	30.63 [X]
12/04/2003	Park Plaza Professional Building 1213 Hermann Dr Houston TX 77004 Officeholder:Misc-Parking	7.00 [X]

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 18/18

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($) / Reimbursement from political contributions intended
10/27/2003	US Postmaster Oak Forest Branch Houston TX 77018-9998 Officeholder:Misc-Postage	188.57 [X] Reimbursement from political contributions intended
Date	Payee name / Payee address; City; State; Zip Code / Purpose of expenditure (See instructions regarding type of information required.)	Amount ($) / Reimbursement from political contributions intended
12/23/2003	US Postmaster Oak Forest Branch Houston TX 77018-9998 Officeholder:Postage	297.90 [X] Reimbursement from political contributions intended

Revised 11/12/1999