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 Total pages filed:

OFFICE USE ONLY

Date Received

RECEIVED
JAN 15 2004
CITY SECRETARY

Date Hand-Delivered or Date Postmarked

Receipt #: Amount:

Date Processed:

Date Imaged:

3 CANDIDATE/ OFFICEHOLDER NAME

TITLE: Mr. FIRST: Judson MI: W

NICKNAME LAST: Rubinson SUFFIX: III

4 CANDIDATE/ OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: P.O. Box 3583 APT / SUITE #: CITY: Hou STATE: Tx ZIP CODE: 77253

5 CAMPAIGN TREASURER NAME

TITLE: Mrs FIRST: Margarettta MI: T

NICKNAME LAST: Robinson SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 938. S. Palmcrest APT / SUITE #: CITY: Pearland STATE: Tx ZIP CODE: 77584

7 CAMPAIGN TREASURER PHONE

AREA CODE: (713) PHONE NUMBER: 436-2060 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: 7 / 15 / 03 THROUGH Month Day Year: 1 / 15 / 04

10 ELECTION

ELECTION DATE Month Day Year: / / N/A

ELECTION TYPE ☑ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): N/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: N/A

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

☐ additional pages

GO TO PAGE 2

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Revised 11/18/1999

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Judson W. Robinson III

15 ACCOUNT # (Ethics Commission filers)

16 SUPPORTING POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
☐ additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS

N/A

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ N/A
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 3,285.00
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ N/A

19 AFFIDAVIT

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

TROY D. LEMON NOTARY PUBLIC STATE OF TEXAS EXPIRES 06-08-2004

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Judson W. Robinson, this the 15th day of January, 20 04, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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Revised 11/16/1999

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Judson W. Robinson III

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/17	Hyatt Regency c/o K. Hoffman Campaign P.O. Box 88082 Hou TX 77288	500.00

8 Purpose of expenditure (See instructions regarding type of information required.): Scholarship Banquet

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/17	Forgotten Angels 6302 Broadway Ste 250 Pearland TX 77581	75.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/2	Jazz Education Inc P.O. Box 8031 Hou Tx 77253	300.00

Purpose of expenditure (See instructions regarding type of information required.): Non Profit Org Support

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
8/4	Broadway West 10401 Broadway, Pearland TX 77584	136.00

Purpose of expenditure (See instructions regarding type of information required.): Campaign Record Storage

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME Judson W. Robinson III

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/27	Uptown PAC 1800 Post Oak Lane Hou Tx 77027	500.00

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 / held
Political Campaign Support		

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29	Sylvester Turner Campaign P.O. Box 1606 Hou Tx 77251	250.00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/30	The Alexander Company 6313 Jenson Dr. Hou Tx 77026	808.00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/1	Lauren's Garden 1914 West Gray #201 Hou Tx 77019	50.00

Purpose of expenditure (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name	Office sought / held
Good Will for Charity		

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

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3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/4	Bill White Campaign	250.00

8 Purpose of expenditure (See instructions regarding type of information required.): Political Contribution

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/8	Broadway West 10401 Broadway, Pearland Tx 77584	195.00

Purpose of expenditure (See instructions regarding type of information required.): Campaign Record Storage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/10	Friends of Herman Park 6201-A- Golf Community Drive Hou Tx 77030	25.00

Purpose of expenditure (See instructions regarding type of information required.): Non Profit Contribution

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/11	LaSalle's Gallery c/o Habitat for Humanity 435 FM 1092 #D Stafford Tx 77477	96.00

Purpose of expenditure (See instructions regarding type of information required.): Non Profit Contribution

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

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Revised 11/12/99

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME Judson W Robinson III

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/17	Mental Health Assoc of Houston 2211 Norfolk #810 Hou Tx 77098	100

8 Purpose of expenditure (See instructions regarding type of information required.)
Non Profit organization

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

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

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