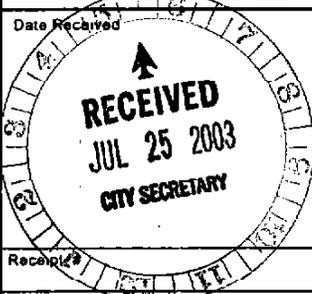


CORRECTED FORM C/OH AND GOOD-FAITH AFFIDAVIT

See backside for instructions

1 ACCOUNT #	2 Total pages filed: <u>2</u>
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3 CANDIDATE / OFFICEHOLDER NAME	TITLE	FIRST	MI	OFFICE USE ONLY Date Received
	NICKNAME	LAST	SUFFIX	

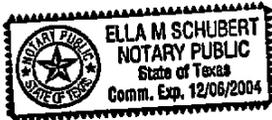


4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report

5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year	HD / PM	Amount
	1	1	03	THROUGH	6	30		

6 EXPLANATION OF CORRECTION	Schedule F of the July 15 report covering 1-1-2003 through 6-30-2003 listed 3 expenditures to S&G Staff Leasing on 4-9-2003, 5-23-2003 and 6-6-2003. Each employee should have been listed instead of solely listing the payroll service. Attached is a corrected Schedule F listing those employees. This was a clerical mistake.
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7 AFFIDAVIT	I swear, or affirm, under penalty of perjury, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, under penalty of perjury, that I did not intend to violate a reporting requirement when I filed the original report.
--------------------	--



[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Orlando Sanchez this the 24th day of July, 2003.

to certify which, witness my hand and seal of office.

Ella M. Schubert

Ella M. Schubert

Notary public

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

Remember To Attach Any Part Of Form C/OH Needed To Report And Explain Corrections

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 1
FILER NAME: Orlando Sanchez	ACCOUNT #: (Ethics Commission filer)

Date 4-9-2003	Payee name Analia Gugliotti 10259 S. Post Oak Houston, TX 77096	Payee address	Amount (\$) \$4,325.00
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Purpose of expenditure (See instructions regarding type of information required.) Contract labor	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date 5-23-2003	Payee name Analia Gugliotti 10259 S. Post Oak Houston, TX 77096	Payee address	Amount (\$) \$4,000.00
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Purpose of expenditure (See instructions regarding type of information required.) Contract labor	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date 6-6-2003	Payee name Analia Gugliotti 10259 S. Post Oak Houston, TX 77096	Payee address	Amount (\$) \$4,000.00
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Purpose of expenditure (See instructions regarding type of information required.) Contract labor	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date 6-6-2003	Payee name Stephanie Cooper 10259 S. Post Oak Houston, TX 77096	Payee address	Amount (\$) \$1,850.00
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Purpose of expenditure (See instructions regarding type of information required.) Contract labor	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date 6-6-2003	Payee name Jim Collins 10259 S. Post Oak Houston, TX 77096	Payee address	Amount (\$) \$1,611.00
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Purpose of expenditure (See instructions regarding type of information required.) Contract labor	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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