McCONNELL & JONES LLP
CERTIFIED PUBLIC ACCOUNTANTS

December 30, 2004

RECEIVED
DEC 30 2004
CITY SECRETARY

Anna Russell
Secretary, City of Houston
City Hall Annex
900 Bagby Street
Houston, 77002

Re: Corrected Campaign Finance Reports for State Representative Sylvester Turner; TEC Account # 00020872

Dear Ms. Russell;

Enclosed please find the corrected reports and supporting documents for the filing period of the January 15th, 2004.

Should you have any questions, please do not hesitate to contact me at (713) 968-1600.

Sincerely,

Thomas Jones

Thomas Jones

THE LAKES ON POST OAK · 3040 POST OAK BLVD., SUITE 1600 · HOUSTON, TEXAS 77056 · TEL. 713.968.1600 FAX. 713.968.1601

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

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 ACCOUNT #	00020872
2 Total pages filed:	17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR; FIRST: Sylvester; MI; NICKNAME; LAST: Turner; SUFFIX
4 ORIGINAL REPORT TYPE	[X] January 15; [ ] July 15; [ ] 30th day before election; [ ] 8th day before election; [ ] Runoff; [ ] Exceeded $500 limit; [ ] 15th day after treasurer appointment (officeholder only); [ ] Final report; [ ] Other (specify)
5 ORIGINAL PERIOD COVERED	Month Day Year: 10 / 26 / 2003 THROUGH Month Day Year: 12 / 31 / 2003
6 EXPLANATION OF CORRECTION	See attached documents.

OFFICE USE ONLY

Date Received

RECEIVED DEC 30 2004 CITY SECRETARY

Date Hand-delivered / Postmarked

Receipt # Amount

Legal Totals

Date Processed

Date Imaged

7 AFFIDAVIT

HELEN J. DOMIO
NOTARY PUBLIC, STATE OF TEXAS
MY COMMISSION EXPIRES
MAY 5, 2006

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Signature of Candidate or Officeholder

Sworn to and subscribed before me by Sylvester Turner this the 29th day of December, 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
	Helen Domio	Office Manager

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

EXPLANATION OF CORRECTION

It has come to my attention that:

1. Inadvertently, my Candidate/Officeholder Report for the above-referenced period did not contain complete addresses for a small number of contributions, pledges, and expenditures. Complete addresses are set forth for each and every one of those contributors, pledgors, and vendors in schedules attached to and filed with this Correction Affidavit.

2. Inadvertently, my Candidate/Officeholder Report for the above-referenced period did not include FEC statements of organization for certain out-of-state political committees from whom I received contributions during that period. It is my understanding that my Campaign Treasurer had each out-of-state political committee's statement of organization at the time of receipt of that political committee's contribution, but I am now told that he did not know whether or not he was required to attach them to the Candidate/Officeholder Report and that he did not attach them to the Candidate/Officeholder Report. Attached to and filed with this Correction Affidavit are FEC statements of organization for the out-of-state political committees from whom I received contributions during the above-referenced period.

3. My campaign received certain contribution checks from corporations, I have now discovered. Inadvertently, we deposited those checks. I know that my Campaign Treasurer, throughout our working relationship, which dated back to 1988, had a system in place in which his office would review contribution checks and return, with a cover letter, all contribution checks submitted by corporations. I relied on my Campaign Treasurer to continue this practice throughout my 2003 mayoral campaign, and I believed that my Campaign Treasurer was indeed following that practice throughout my 2003 mayoral campaign. I had no knowledge that any corporate contributions had been received. All contributions received from corporations have been returned, and copies of checks returning those corporate contributions are attached to and filed with this Correction Affidavit.

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): 00020872

2 Total pages filed: 17

OFFICE USE ONLY
Date Received
Date Hand-delivered or Date Postmarked
Receipt # | Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR | FIRST: Sylvester | MI
NICKNAME | LAST: Turner | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
440 Louisiana, Suite 1880
Houston, TX 77002

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(713) 650-3688

6 CAMPAIGN TREASURER NAME
MS / MRS / MR | FIRST: Thomas | MI
NICKNAME | LAST: Jones | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3040 Post Oak Blvd, Suite 1600
Houston, TX 77056

8 CAMPAIGN TREASURER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(713) 968-1600

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

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

11 ELECTION
ELECTION DATE Month Day Year: 11 / 04 / 2003
ELECTION TYPE: ☐ Primary ☐ Runoff [X] General ☐ Special

12 OFFICE
OFFICE HELD (if any): State Representative 139

13 OFFICE SOUGHT (if known): Other -- Mayor, City of Houston

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **
Name
Address / PO Box; Apt. / Suite #; City; State; Zip Code
☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Sylvester Turner

16 ACCOUNT # (Ethics Commission filers) 00020872

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	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 70213.31
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

19 AFFIDAVIT

HELEN J. DOMIO
NOTARY PUBLIC, STATE OF TEXAS
MY COMMISSION EXPIRES
MAY 5, 2006

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Sylvester Turner, this the 29th day of December 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
	Helen Domio	Officer Manager

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 1/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 00020872

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)
11/3/2003	Jamie Babineaux [redacted] Houston TX 77271-1222	5,000.00	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

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)
10/30/2003	Gwendolyn Climmons [redacted] Houston TX 77002	250.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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	Howard Jefferson [redacted] Houston TX 77054	150.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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	Russell M. Smith [redacted] Houston TX 77009	100.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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)
10/26/2003	Bill Solomon [redacted] Houston TX 77056	200.00	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 2/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 00020872

4 Date	5 Full name of contributor	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/28/2003	☒ out-of-state PAC (ID#: C00011114) American Federation of State, County and Municipal Employees 6 Contributor address; City; State; Zip Code [redacted] Washington DC 20036	5,000.00	

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	☒ out-of-state PAC (ID#: C00002766) United Food & Commercial Workers Contributor address; City; State; Zip Code [redacted] Washington DC 20006	1,000.00	

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

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 this report: 3/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/29/03	AVW-TELAV 1001 Avenida de las Americas Houston TX 77010	1200.00

8 Purpose of expenditure (See instructions regarding type of information required.): Event Costs

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	AVW-TELAV 1001 Avenida de las Americas Houston TX 77010	1450.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Donald Aaron 2250 Holly Hall St Apt 189 Houston TX 77054	1500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/29/03	Advantage Communication Consultants 4412 Almeda Rd, #200 Houston TX 77004	12000.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 4/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Criselda Adalpe 2810 Leland St Houston TX 77003	950.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/19/03	American Express PO Box 650448 Dallas TX 75265	1829.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/13/03	American Leadership Forum 3101 Richmond Ave, Suite 140 Houston TX 77098	500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Aramark Sports & Entertainment 920 Frostwood Houston TX 77024	6506.57

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

Complete if direct expenditure to benefit C/OH:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name	6 Payee address; City; State; Zip Code	7 Amount ($)
10/30/03	Big Tex	402 W. 16th Street Houston TX 77008	2669.55

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

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/30/03	Brinks Home Security	11210 Wilcrest Green Dr Houston TX 77042	243.78

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/3/03	Contract Callers – Phone Bank	3227 Main Houston TX 77002	17099.50

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/30/03	DoubleTree Hotel	400 Dallas St Houston TX 77002	1406.17

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

Complete if direct expenditure to benefit C/OH:

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 this report: 6/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/31/03	Family Cafe 2712 Boldgett Houston TX 77004	2409.50

8 Purpose of expenditure (See instructions regarding type of information required.): Event Costs

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Victor Garcia 2810 Leland St Houston TX 77003	650.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/5/03	Golden Corral 3033 South Loop West Houston TX 77054	2814.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/30/03	Renee Gray 12502 Taylorwood Lane Houston TX 77070	3500.00

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

Complete if direct expenditure to benefit C/OH:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name	6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Crystal Hadnott	5500 Sampson St, Apt 4301 Houston TX 77004	1000.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/29/03	Clayton Hardman	2814 Stallings Dr Houston TX 77088	899.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/3/03	Clayton Hardman	2814 Stallings Dr Houston TX 77088	1000.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/3/03	Sheila Hays-Mouton	12207 State Hwy 6, Suite 375 Fresno TX 77545	400.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 8/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Enid Henderson 2220 St. James Pl Pearland TX 77581	700.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/29/03	Houston Defender 3003 South Loop West Houston TX 77054	809.94

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/27/03	Houston Style Magazine 2646 S. Loop West, Suite 375 Houston TX 77054	1000.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/5/03	Leticia Jackson 14623 Shadewood Court Houston TX 77015	500.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 9/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Kyle Johnston 311 Ballantrae Houston TX 77015	1250.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/27/03	Don Jones 3227 Main St Houston TX 77002	3600.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/28/03	Don Jones 3227 Main St Houston TX 77002	2187.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/29/03	Don Jones 3227 Main St Houston TX 77002	2500.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 10/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

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
10/30/03	Don Jones	3227 Main St Houston TX 77002	1000.00	Field Activities	
11/3/04	Don Jones	3227 Main St Houston TX 77002	28000.00	Field Activities	
11/3/03	Don Jones	3227 Main St Houston TX 77002	6500.00	Contract Wages	
11/4/03	Don Jones	3227 Main St Houston TX 77002	2000.00	Field Activities	

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 this report: 11/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	K'Netha Jones 4011 Charleston St Houston TX 77021	1500.00

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

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/5/04	KWWJ Radio 4638 Decker Dr Baytown TX 77520	1500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Nata Koerber 704 E 11 ½ Houston TX 77008	800.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/29/03	Monarch Printing 6605 McGrew St, Suite B Houston TX 77087	2698.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 12/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name	6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Derrick Muhammed	4443 OST Houston TX 77021	1000.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/1/04	One Stop Graphics	1716 Blodgett Houston TX 77004	2050.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/29/03	Chad Proudluck	3227 Main Houston TX 77002	3147.03

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/31/03	RS Supermarketing	4711 Main Houston TX 77002	2185.32

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

Complete if direct expenditure to benefit C/OH:

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 this report: 13/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name	6 Payee address; City; State; Zip Code	7 Amount ($)
11/3/03	Linda Reece	4444 Victory Dr Apt 1113 Houston TX 77088	500.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/14/03	Linda Reece	4444 Victory Dr Apt 1113 Houston TX 77088	500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
10/30/03	Reliant Energy	PO Box 4932 Houston TX 77210	1737.28

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name	Payee address; City; State; Zip Code	Amount ($)
11/6/03	Delwin Rettig	3227 Main Houston TX 77002	5000.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 14/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020972

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/19/03	Jaromey Roberts II 5010 Briscoe Houston TX 77033	1500.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Sheryl Roppolo 910 Pemberton Channelview TX 77530	1500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Francisco Sanchez 4514 Ella Blvd Houston TX 77018	1000.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Sue Davis Communications 4721 Hummingbird Houston TX 77035	2500.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 15/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/1/03	Jermaine Thomas 10101 S. Gessner Houston TX 77071	2000.00

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

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
10/2703	Titan Communications 2310 Gardenia Houston TX 77018	374.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Titan Communications 2310 Gardenia Houston TX 77018	1500.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Mary Waites 6802 Maczali Houston TX 77076	3000.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 16/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020872

4 Date	5 Payee Name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/14/03	Mary Waites 6802 Maczali Houston TX 77076	3000.00

8 Purpose of expenditure (See instructions regarding type of information required.): Contract Wages

9 Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Walk Teams 3227 Main St Houston TX 77002	32790.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Chris Watson 1617 Fannin #1616 Houston TX 77002	1000.00

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

Complete if direct expenditure to benefit C/OH:

Date	Payee Name / Payee address; City; State; Zip Code	Amount ($)
11/3/03	Janice Weaver 3414 Cheaney Dr Houston TX 77066	1250.00

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

Complete if direct expenditure to benefit C/OH:

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 this report: 17/17

2 FILER NAME: Sylvester Turner

3 ACCOUNT # (Ethics Commission filers): 0020672

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
11/3/03	Carmen Williams	301 W. Little York Rd Houston TX 77076	317.26	Supplies	
11/3/03	Carmen Williams	301 W. Little York Rd Houston TX 77076	1000.00	Contract Wages	
11/3/03	John Witson	8634 Belle Park Houston TX 77099	900.00	Contract Wages	

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

American Federation of State, County and Municipal Employees

ADDRESS (number and street) ▼ 1625 L Street, N.W.

(Check if address is changed)

Washington, DC 20036 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 04 23 2001

3. FEC IDENTIFICATION NUMBER ▶ C 00011114

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William Lucy

Signature of Treasurer Date 04 23 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only					

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

FE1AN046.PDF

5. TYPE OF COMMITTEE (Check One)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought: House Senate President State District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Write or Type Committee Name

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Riggs National Bank

Mailing Address 1800 M Street, N.W.

Washington, DC 20036 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Amalgamated Bank of New York

Mailing Address 1825 K Street, N.W.

Washington, DC 20006

CITY ▲ STATE ▲ ZIP CODE ▲

SYLVESTER TURNER CAMPAIGN FUND
3040 POST OAK BLVD., SUITE 1600
HOUSTON, TX 77056

THE CHASE MANHATTAN BANK
HOUSTON, TX 77002
32-115/1110

2825

11/29/2004

PAY TO THE ORDER OF McGee Chapel Baptist Church $ **1,000.00

One Thousand and 00/100********** DOLLARS

McGee Chapel Baptist Church
2025 Hwy 6 South
Houston, TX 77077

THOMAS JONES, JR., TREASURER

MEMO

⑈002825⑈ ⑆111001150⑆ ⑈0010175296 3⑈

SYLVESTER TURNER CAMPAIGN FUND 2825

McGee Chapel Baptist Church 11/29/2004 1,000.00

Business Checking 1,000.00

SYLVESTER TURNER CAMPAIGN FUND 2825

McGee Chapel Baptist Church 11/29/2004 1,000.00

Business Checking 1,000.00

504398 (4/04)

SYLVESTER TURNER CAMPAIGN FUND
3040 POST OAK BLVD., SUITE 1600
HOUSTON, TX 77056

THE CHASE MANHATTAN BANK
HOUSTON, TX 77002
32-115/1110

2813

11/18/2004

PAY TO THE ORDER OF First Choice Ambulance Services, Inc. $ **40.00

Forty and 00/100********** DOLLARS

First Choice Ambulance Services, Inc.

THOMAS JONES, JR., TREASURER

MEMO

⑈002813⑈ ⑆111001150⑆ ⑈0010175296 3⑈

SYLVESTER TURNER CAMPAIGN FUND 2813

First Choice Ambulance Services, Inc. 11/18/2004 40.00

Business Checking 40.00

SYLVESTER TURNER CAMPAIGN FUND 2813

First Choice Ambulance Services, Inc. 11/18/2004 40.00

Business Checking 40.00

504398 (4/04)

SYLVESTER TURNER CAMPAIGN FUND
3040 POST OAK BLVD., SUITE 1600
HOUSTON, TX 77056

THE CHASE MANHATTAN BANK
HOUSTON, TX 77002
32-115/1110

2822

11/18/2004

PAY TO THE ORDER OF O.W. Wiley Mortuary Inc. $ **100.00

One Hundred and 00/100********** DOLLARS

O.W. Wiley Mortuary Inc.

THOMAS JONES, JR., TREASURER

MEMO

⑈002822⑈ ⑆111001150⑆ ⑈0010175296 3⑈

SYLVESTER TURNER CAMPAIGN FUND 2822

O.W. Wiley Mortuary Inc. 11/18/2004 100.00

Business Checking 100.00

SYLVESTER TURNER CAMPAIGN FUND 2822

O.W. Wiley Mortuary Inc. 11/18/2004 100.00

Business Checking 100.00

504398 (4/04)

SYLVESTER TURNER CAMPAIGN FUND
3040 POST OAK BLVD., SUITE 1600
HOUSTON, TX 77056

THE CHASE MANHATTAN BANK
HOUSTON, TX 77002
32-115/1110

2810

11/18/2004

PAY TO THE ORDER OF Renwick Homes, Inc. $ **500.00

Five Hundred and 00/100********** DOLLARS

Renwick Homes, Inc.

THOMAS JONES, JR., TREASURER

MEMO

© 2003 INTUIT INC. # 571 1-800-433-8810

⑈002810⑈ ⑆111001150⑆ ⑈0010175296 3⑈

SYLVESTER TURNER CAMPAIGN FUND

2810

Renwick Homes, Inc. 11/18/2004 500.00

Business Checking 500.00

SYLVESTER TURNER CAMPAIGN FUND

2810

Renwick Homes, Inc. 11/18/2004 500.00

Business Checking 500.00

504398 (4/04)