

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: 49
3 CANDIDATE OFFICEHOLDER NAME	TITLE GERALD	FIRST MI	OFFICE USE ONLY
4 CANDIDATE OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	NICKNAME WOMACK	LAST MI	
5 CAMPAIGN TREASURER NAME	ADDRESS/P.O. BOX: 4412 ALMEDA	APT/SUITE #: HOUSTON	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	CITY: HOUSTON	STATE: TEXAS	ZIP CODE: 77004
7 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 524-8413	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
9 PERIOD COVERED	MONTH 7/1/2001	DAY 2001	YEAR 2001
10 ELECTION	MONTH 11	DAY 07	YEAR 2001
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) HOUSTON CITY COUNCIL-DISTRICT D	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct 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/P.O. BOX: APT/SUITE #: CITY: STATE: ZIP CODE:		

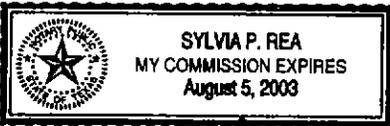
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

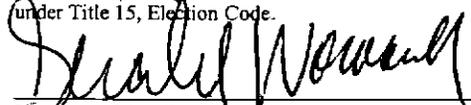
14 C/OH NAME GERALD WOMACK		15 ACCOUNT # (Ethics Commission filers)
16 SUPPORTING POLITICAL COMMITTEES <input type="checkbox"/> additional pages	** This listing includes political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 NO REPORTABLE ACTIVITY	<input type="checkbox"/> 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).	\$ 46,119.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OF LESS. UNLESS ITEMIZED	\$ _____
	4. TOTAL POLITICAL EXPENDITURES	\$ 51,066.78
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THIS REPORTING PERIOD	\$ _____

19 AFFIDAVIT



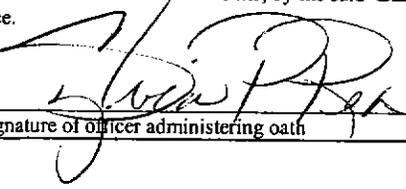
SYLVIA P. REA
MY COMMISSION EXPIRES
August 5, 2003

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
GERALD WOMACK

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **GERALD WOMACK**, this the **5TH** day of **October, 2001**, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

SYLVIA P. REA
Print name of officer administering oath

NOTARY PUBLIC
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission filers)	
4 Date 7-1-01	5 Full name of contributor Algenita Scott Davis Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	7 Amount of contribution 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 7-2-01	Full name of contributor Jarvis Stewart Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 250.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-8-01	Full name of contributor Quentin R. Mease Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-10-01	Full name of contributor Booker T. Morris Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-10-01	Full name of contributor Kathleen O'Conner Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-10-01	Full name of contributor Robert A. Robinson Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 250.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-12-01	Full name of contributor C. M. Garver, Investment Accounts Contributor address: City; State; Zip Code [REDACTED]	<input type="checkbox"/> out of state PAC	Amount of contribution 500.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **27**

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission filers)

4 Date
7-12-01

5 Full name of contributor
Joe Pryzant

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77081

7 Amount of contribution
250.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
7-13-01

Full name of contributor
DeRoyce Coleman

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77004

Amount of contribution
500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
7-14-01

Full name of contributor
Elaine Barnett

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Missouri City, Tx. 77489

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
7-14-01

Full name of contributor
Elaine Oliver

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Missouri City, Tx. 77489

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
7-22-01

Full name of contributor
Yancy Saunders

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77056

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
7-23-01

Full name of contributor
Alfred Foster

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77062-4795

Amount of contribution
50.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
7-24-01

Full name of contributor
Hemachano Kolluru

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Sugarland, Tx. 77479-3081

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission filers)

4 Date
7-24-01

5 Full name of contributor out of state PAC
Ozell Taylor Johnson

7 Amount of contribution

8 In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77021

50.00

9 Principal occupation

10 Employer (optional)

Date
7-24-01

Full name of contributor out of state PAC
Bonita Denyse Thierry

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
405 Main, Ste. 310, Houston, Tx. 77002

100.00

Principal occupation

Employer (optional)

Date
7-25-01

Full name of contributor out of state PAC
Mitchell Allan Young, M.D.

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77006

100.00

Principal occupation

Employer (optional)

Date
7-25-01

Full name of contributor out of state PAC
Dorothy Carson

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77053

100.00

Principal occupation

Employer (optional)

Date
7-27-01

Full name of contributor out of state PAC
Jocelyn W. L. Matson

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77021

100.00

Principal occupation

Employer (optional)

Date
7-27-01

Full name of contributor out of state PAC
Vinson & Elkins Texas

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77002-6760

1000.00

Principal occupation

Employer (optional)

Date
7-28-01

Full name of contributor out of state PAC
Bennie L. Baal, III

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77035

50.00

Principal occupation

Employer (optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **27**

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
7-28-01

5 Full name of contributor
Robert C. Combre out of state PAC

7 Amount of contribution

8 In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77021-1524**

100.00

9 Principal occupation

10 Employer (optional)

Date
7-28-01

Full name of contributor
Yachtze Luchin out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77063**

75.00

Principal occupation

Employer (optional)

Date
7-28-01

Full name of contributor
SWBT Political Action Committee out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77027**

200.00

Principal occupation

Employer (optional)

Date
7-29-01

Full name of contributor
Anella Rae Coleman out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77004**

50.00

Principal occupation

Employer (optional)

Date
7-29-01

Full name of contributor
Theresa Bailey out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77021-1540**

250.00

Principal occupation

Employer (optional)

Date
7-29-01

Full name of contributor
Shasta A. Warren out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77021**

100.00

Principal occupation

Employer (optional)

Date
7-29-01

Full name of contributor
Steven B. Schnee out of state PAC

Amount of contribution

In-kind contribution description (if applicable)

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77019**

100.00

Principal occupation

Employer (optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 7-29-01	5 Full name of contributor Baxter D. Montgomery Contributor address: City; State; Zip Code [REDACTED], Missouri City, Tx. 77489	<input type="checkbox"/> out of state PAC	7 Amount of contribution 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 7-29-01	Full name of contributor Karen Willie Malveaux, M.D. Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021-1126	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-29-01	Full name of contributor Shayna Lee, M.D. Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77230-0837	<input type="checkbox"/> out of state PAC	Amount of contribution 200.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-29-01	Full name of contributor Marilyn L. Logan Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77054	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-29-01	Full name of contributor Edith Irby Jones Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	<input type="checkbox"/> out of state PAC	Amount of contribution 500.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-29-01	Full name of contributor Von Ceil Carter Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 7-29-01	Full name of contributor Dannette McElroy-Davis Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77096	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED. If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK				3 ACCOUNT # (Ethics Commission fliers)	
4 Date 8-1-01	5 Full name of contributor Eddie W. Gibbs <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77221	7 Amount of contribution 25.00	8 In-kind contribution description(if applicable)		
9 Principal occupation			10 Employer (optional)		
Date 8-2-01	Full name of contributor Preston Julian, Jr. <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77071	Amount of contribution 1000.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-2-01	Full name of contributor Lindley C. Murray <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Washington, D.C. 20012	Amount of contribution 50.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-3-01	Full name of contributor Gene Locke <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	Amount of contribution 1000.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-6-01	Full name of contributor Douglas Carter <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Washington, D.C. 20013-1195	Amount of contribution 200.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-6-01	Full name of contributor Gary Bolden <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Carson, CA 90746	Amount of contribution 100.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-6-01	Full name of contributor Gary E. Bolden <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Carson, CA 90742	Amount of contribution 100.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK				3 ACCOUNT # (Ethics Commission files)	
4 Date 8-7-01	5 Full name of contributor Wendell Simpson <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77230-0842	7 Amount of contribution 100.00	8 In-kind contribution description(if applicable)		
9 Principal occupation			10 Employer (optional)		
Date 8-7-01	Full name of contributor Scott R. Rubenstein <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Bellaire, Tx. 77401	Amount of contribution 1500.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-7-01	Full name of contributor Robert G. Gregory <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Somerset, NJ 08873	Amount of contribution 20.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-8-01	Full name of contributor Lawrence Feacher <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Decatur, GA 30034	Amount of contribution 50.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-9-01	Full name of contributor Richard R. Newman <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	Amount of contribution 65.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-9-01	Full name of contributor Ralph Joseph Coleman <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77035-7200	Amount of contribution 50.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
Date 8-9-01	Full name of contributor Randy Currie <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77271	Amount of contribution 100.00	In-kind contribution description(if applicable)		
Principal occupation			Employer (optional)		
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 8-10-01	5 Full name of contributor Orrice J. Wynn Contributor address: City; State; Zip Code 8627 West Cove Circle, Houston, Tx. 77064	<input type="checkbox"/> out of state PAC	7 Amount of contribution 25.00	8 In-kind contribution description(if applicable)
9 Principal occupation		10 Employer (optional)		
Date 8-10-01	Full name of contributor Derry E. Jones Contributor address: City; State; Zip Code 315 Branard, No. 3, Houston, Tx. 77006	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
Date 8-11-01	Full name of contributor Carl T. Kidd Contributor address: City; State; Zip Code 12210 Oyster Cove Ct, Stafford, Tx. 77477	<input type="checkbox"/> out of state PAC	Amount of contribution 500.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
Date 8-11-01	Full name of contributor Lawrence Satterfield Contributor address: City; State; Zip Code 9307 Shady Lane, Houston, Tx. 77063	<input type="checkbox"/> out of state PAC	Amount of contribution 1000.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
Date 8-11-01	Full name of contributor Sherman H. Rideaux, Jr. Contributor address: City; State; Zip Code 8614 Wood Camp, Houston, Tx. 77088	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
Date 8-11-01	Full name of contributor Anthony L. Jackson Contributor address: City; State; Zip Code 4115 Breakwood Dr., Houston, Tx. 77025-4006	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
Date 8-11-01	Full name of contributor Kenneth J. Holden Contributor address: City; State; Zip Code 2300 Old Spanish Trail, No. 1007, Houston, Tx. 77054	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)		
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
8-11-01

5 Full name of contributor
Cassandra D. Alston out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77025

7 Amount of contribution
50.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-11-01

Full name of contributor
Carl Kidd out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Stafford, Tx. 77477

Amount of contribution
212.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
David F. Jones out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77025-4006

Amount of contribution
30.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
Lawrence Satterfield out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77063

Amount of contribution
400.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
Michael W. Sanders out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77021

Amount of contribution
110.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
Richard W. Simmons out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77035

Amount of contribution
1200.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
Rodney G. Hampton out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Atlanta, GA

Amount of contribution
200.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK				3 ACCOUNT # (Ethics Commission files)	
4 Date 8-11-01	5 Full name of contributor Paul E. Jefferson Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77077	<input type="checkbox"/> out of state PAC	7 Amount of contribution 100.00	8 In-kind contribution description(if applicable)	
9 Principal occupation			10 Employer (optional)		
Date 8-12-01	Full name of contributor Joshua Hayes, Jr. Contributor address: City; State; Zip Code [REDACTED] aton Rouge, LA 70807	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 8-13-01	Full name of contributor Etta Hill Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77025-3909	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 8-15-01	Full name of contributor Carolyn Sellers Contributor address: City; State; Zip Code [REDACTED] Sugarland, Tx. 77479-6282	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 8-16-01	Full name of contributor John Newton Barineau, III Contributor address: City; State; Zip Code [REDACTED], Ste. 810, Houston, Tx. 77042	<input type="checkbox"/> out of state PAC	Amount of contribution 5000.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 8-19-01	Full name of contributor Brenda Joyce Tolden Contributor address: City; State; Zip Code [REDACTED], No. 304, Houston, Tx. 77054	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 8-19-01	Full name of contributor Lois Moore Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission fliers)

4 Date
8-19-01

5 Full name of contributor
Albertha L. Adams

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77021**

7 Amount of contribution
50.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-19-01

Full name of contributor
Arthur L. Jackson

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **e, Houston, Tx. 77021**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-19-01

Full name of contributor
Algenita Davis

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **, Houston, Tx. 77021**

Amount of contribution
250.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-19-01

Full name of contributor
Karen Wells

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **ari City, Tx. 77489-2456**

Amount of contribution
125.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-19-01

Full name of contributor
Roy L. Owens, III

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **, Houston, Tx. 77004**

Amount of contribution
500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-20-01

Full name of contributor
Hemachandra Kolluru

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Sugarland, Tx. 77479-3081**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-20-01

Full name of contributor
Benjamin J. Durant

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77004-5608**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
8-20-01

5 Full name of contributor
Lawrence B. Snowden out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77021

7 Amount of contribution
560.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-20-01

Full name of contributor
C. Meiling Moran out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77006-4605

Amount of contribution
25.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-20-01

Full name of contributor
Dorothy B. Lombard out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77021

Amount of contribution
50.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-21-01

Full name of contributor
Luisa Ehrig out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77042-5526

Amount of contribution
40.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-21-01

Full name of contributor
Shawn A. Taylor out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Sugarland, Tx. 77479-3820

Amount of contribution
1000.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-21-01

Full name of contributor
Charles M. Bush out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Dallas, Tx. 75225

Amount of contribution
1000.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-22-01

Full name of contributor
Shirley A. Delibero out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], No. 1703, Houston, Tx. 77024

Amount of contribution
150.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **27**

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
8-23-01

5 Full name of contributor out of state PAC
Richard R. Newman

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77021

7 Amount of contribution
300.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-20-01

Full name of contributor out of state PAC
Lyndon Alexander Taylor

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77002

Amount of contribution
200.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Contributor address: City; State; Zip Code

Amount of contribution

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Contributor address: City; State; Zip Code

Amount of contribution

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Contributor address: City; State; Zip Code

Amount of contribution

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Contributor address: City; State; Zip Code

Amount of contribution

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Contributor address: City; State; Zip Code

Amount of contribution

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission filers)	
4 Date 8-23-01	5 Full name of contributor Brenda J. Peters <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	7 Amount of contribution 100.00	8 In-kind contribution description (if applicable)	
9 Principal occupation		10 Employer (optional)		
Date 8-24-01	Full name of contributor Ojay M. Grace <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77074	Amount of contribution 150.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Lufte Hassan <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77042	Amount of contribution 250.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Silena C. Morris <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	Amount of contribution 50.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Dwane Harris <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	Amount of contribution 50.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Samuel B. Pegram <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	Amount of contribution 500.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Dr. Nannette Williams <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77071	Amount of contribution 25.00	In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 8-24-01	5 Full name of contributor John S. Kandeh Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77081	<input type="checkbox"/> out of state PAC	7 Amount of contribution 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 8-24-01	Full name of contributor Foad A. Reihani Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77573-4815	<input type="checkbox"/> out of state PAC	Amount of contribution 250.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Wanda Carraway Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77098	<input type="checkbox"/> out of state PAC	Amount of contribution 25.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Arthur L. Washington Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77267-0641	<input type="checkbox"/> out of state PAC	Amount of contribution 70.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Arthur L. Washington Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77267-0641	<input type="checkbox"/> out of state PAC	Amount of contribution 30.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Tracy D. DeBose Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77042	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-24-01	Full name of contributor Fatmatta Turay Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77099-2557	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission fliers)	
4 Date 8-24-01	5 Full name of contributor Linda Waters Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77271-0352	<input type="checkbox"/> out of state PAC	7 Amount of contribution 10.00
9 Principal occupation		10 Employer (optional)	
Date 8-24-01	Full name of contributor Dr. Shayna Patrice Lee Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00
Principal occupation		Employer (optional)	
Date 8-24-01	Full name of contributor W. D. Davis Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77098	<input type="checkbox"/> out of state PAC	Amount of contribution 200.00
Principal occupation		Employer (optional)	
Date 8-24-01	Full name of contributor Willie M. Evans Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77047-1627	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00
Principal occupation		Employer (optional)	
Date 8-24-01	Full name of contributor Vanieceia Williams Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77071-3424	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00
Principal occupation		Employer (optional)	
Date 8-24-01	Full name of contributor Bessie M. Swindle Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77047-1823	<input type="checkbox"/> out of state PAC	Amount of contribution 25.00
Principal occupation		Employer (optional)	
Date 8-24-01	Full name of contributor Belinda Kay James Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77071	<input type="checkbox"/> out of state PAC	Amount of contribution 10.00
Principal occupation		Employer (optional)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission filers)

4 Date
8-24-01

5 Full name of contributor
Dannette McElroy-Davis out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77096**

7 Amount of contribution
20.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-24-01

Full name of contributor
Christine Lee Williams out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Pearland, Tx. 77584**

Amount of contribution
500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Dr. Polly Turner out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77004**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Ella E. Brown out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77004**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Frank Perrone out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, 77002-2730**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Tequilla J. Wilson out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77004**

Amount of contribution
25.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Blaize Kaduru out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Sugarland, Tx. 77478-4737**

Amount of contribution
500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission fiers)

4 Date
8-24-01

5 Full name of contributor
Marilyn L. Logan out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77054

7 Amount of
contribution
25.00

8 In-kind contribution
description (if
applicable)

9 Principal occupation

10 Employer (optional)

Date
8-24-01

Full name of contributor
Dr. Robert F. Austin out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77047-2908

Amount of
contribution
250.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Lora R. Clemmons out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx. 77004

Amount of
contribution
250.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Norman Roy Sterling out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77004

Amount of
contribution
100.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Larry Green out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77021

Amount of
contribution
500.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Diane David Dealy out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77057

Amount of
contribution
150.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

Date
8-24-01

Full name of contributor
Sofia Adrogue out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77019

Amount of
contribution
100.00

In-kind contribution
description (if
applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
8-24-01

5 Full name of contributor out of state PAC
George Nicol

Contributor address: City; State; Zip Code
[REDACTED], **Lanham, MD 20706**

7 Amount of contribution
50.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-24-01

Full name of contributor out of state PAC
Sam Jarrett

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77402**

Amount of contribution
300.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-25-01

Full name of contributor out of state PAC
Laverne W. Richards

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77031**

Amount of contribution
25.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-25-01

Full name of contributor out of state PAC
Tull Thornton

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77016**

Amount of contribution
500.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-25-01

Full name of contributor out of state PAC
Nicole C. West

Contributor address: City; State; Zip Code
[REDACTED], **Pearland, Tx. 77584**

Amount of contribution
250.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-25-01

Full name of contributor out of state PAC
Rhonda Rochon Cotton

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77021-1504**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-25-01

Full name of contributor out of state PAC
George S. Nicol

Contributor address: City; State; Zip Code
[REDACTED], **Lanham, MD 20706**

Amount of contribution
50.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 8-25-01	5 Full name of contributor Romaine Williams Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77057	<input type="checkbox"/> out of state PAC	7 Amount of contribution 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 8-27-01	Full name of contributor Kenneth A. James Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77205	<input type="checkbox"/> out of state PAC	Amount of contribution 5000.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-27-01	Full name of contributor Marvin D. Williams Contributor address: City; State; Zip Code [REDACTED] Worth, Tx. 76118-6934	<input type="checkbox"/> out of state PAC	Amount of contribution 250.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-28-01	Full name of contributor Regina J. Rogers Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77024	<input type="checkbox"/> out of state PAC	Amount of contribution 200.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-28-01	Full name of contributor Nancy Berkman Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77025	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-28-01	Full name of contributor Irene Johnson Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77056	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 8-28-01	Full name of contributor John C. Brittain Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77025	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission filers)

4 Date
8-28-01

5 Full name of contributor
Willard L. Jackson, Jr. out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77021**

7 Amount of contribution
500.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-28-01

Full name of contributor
Marvalette Fentress out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77088-2426**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-28-01

Full name of contributor
Yvonne Brown out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77057**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-28-01

Full name of contributor
Charles W. Livingston out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Missouri City, Tx. 77459**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-28-01

Full name of contributor
Mark D. Taylor out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Spring, Tx. 77379**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-28-01

Full name of contributor
Herbert W. Powell out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **e, Humble, Tx. 77346**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-28-01

Full name of contributor
R.S.V.P. Event Designs out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **, Suite 24, Houston, Tx. 77056**

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 8-28-01	5 Full name of contributor Lloyd Lacy <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77077	7 Amount of contribution 100.00	8 In-kind contribution description (if applicable)	
9 Principal occupation		10 Employer (optional)		
4 Date 8-28-01	5 Full name of contributor Sherif Mohammed <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Sugarland, Tx. 77459-5619	7 Amount of contribution 200.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
4 Date 8-28-01	5 Full name of contributor Kefelegne Tasfaye <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Sugarland, Tx. 77479-4199	7 Amount of contribution 200.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
4 Date 8-28-01	5 Full name of contributor 1st Premier Lending <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77092	7 Amount of contribution 1250.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
4 Date 8-28-01	5 Full name of contributor Houston Ass. General Contractors PAC <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77092	7 Amount of contribution 500.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
4 Date 8-28-01	5 Full name of contributor A. Martin Wickliff, Jr. <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED], Houston, Tx. 77021	7 Amount of contribution 100.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		
4 Date 8-30-01	5 Full name of contributor Robert C. Combre <input type="checkbox"/> out of state PAC Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021-1524	7 Amount of contribution 100.00	8 In-kind contribution description (if applicable)	
Principal occupation		Employer (optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
8-30-01

5 Full name of contributor
Lawrence W. Hill

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Humble, Tx. 77345**

7 Amount of contribution
500.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
8-30-01

Full name of contributor
Datacom Business Systems

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77076**

Amount of contribution
1000.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-1-01

Full name of contributor
Rev. Elmo Johnson

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77019**

Amount of contribution
20.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-1-01

Full name of contributor
Henry L. Shorts

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], **Houston, Tx. 77048**

Amount of contribution
15.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-1-01

Full name of contributor
Joseph Kuykendall

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77051**

Amount of contribution
20.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-1-01

Full name of contributor
Mrs. Vergil Gay

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77047-1607**

Amount of contribution
25.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-1-01

Full name of contributor
Bessie M. Swindle

out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] **Houston, Tx. 77047-1823**

Amount of contribution
20.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 9-1-01	5 Full name of contributor Joe Halliburton Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77087	<input type="checkbox"/> out of state PAC	7 Amount of contribution 2.50	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 9-1-01	Full name of contributor Gwen Sweeney Contributor address: City; State; Zip Code [REDACTED] , Houston, Tx. 77051	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-1-01	Full name of contributor Rev. E. L. Stubblefield Contributor address: City; State; Zip Code , Houston, Tx.	<input type="checkbox"/> out of state PAC	Amount of contribution 20.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-1-01	Full name of contributor Rev. J. T. Hart Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77033	<input type="checkbox"/> out of state PAC	Amount of contribution 20.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-1-01	Full name of contributor Robert Stanford Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-1-01	Full name of contributor Bobby E. Glenn Contributor address: City; State; Zip Code [REDACTED] , Houston, Tx. 77006	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-1-01	Full name of contributor Cheryl Manul Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77087	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK				3 ACCOUNT # (Ethics Commission files)	
4 Date 9-1-01	5 Full name of contributor Thomas Corbin Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	7 Amount of contribution 10.00	8 In-kind contribution description(if applicable)	
9 Principal occupation			10 Employer (optional)		
Date 9-1-01	Full name of contributor Rev. Nathani Beverly Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77024	<input type="checkbox"/> out of state PAC	Amount of contribution 5.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 9-1-01	Full name of contributor Vernus C. Swisher Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004-6411	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 9-1-01	Full name of contributor Mrs. William A. Lawson Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77004-6533	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 9-4-01	Full name of contributor The Guess Firm Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77054	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 9-6-01	Full name of contributor Cheryl Moore McNair Contributor address: City; State; Zip Code [REDACTED] Seabrook, Tx. 77586	<input type="checkbox"/> out of state PAC	Amount of contribution 500.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
Date 9-6-01	Full name of contributor Helen M. Abernathy Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	Amount of contribution 300.00	In-kind contribution description(if applicable)	
Principal occupation			Employer (optional)		
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 27	
2 FILER NAME GERALD WOMACK			3 ACCOUNT # (Ethics Commission files)	
4 Date 9-6-01	5 Full name of contributor James Matthew Douglas Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	7 Amount of contribution 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation		10 Employer (optional)		
Date 9-6-01	Full name of contributor Pamela R. Thorne Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77063-7202	<input type="checkbox"/> out of state PAC	Amount of contribution 250.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-6-01	Full name of contributor Kathy C. Wells Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77021	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-6-01	Full name of contributor John L. Guess Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77096	<input type="checkbox"/> out of state PAC	Amount of contribution 100.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-6-01	Full name of contributor Byron M. Cleggett Contributor address: City; State; Zip Code [REDACTED] Missouri City, Tx. 77489	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-6-01	Full name of contributor Walter H. Criner, Jr. Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77057	<input type="checkbox"/> out of state PAC	Amount of contribution 50.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
Date 9-7-01	Full name of contributor Bruns Quality Service Contributor address: City; State; Zip Code [REDACTED] Houston, Tx. 77254-0325	<input type="checkbox"/> out of state PAC	Amount of contribution 500.00	In-kind contribution description (if applicable)
Principal occupation		Employer (optional)		
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME **GERALD WOMACK**

3 ACCOUNT # (Ethics Commission files)

4 Date
9-11-01

5 Full name of contributor
Tyronne Byrd out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Katy, Tx. 77450

7 Amount of contribution
100.00

8 In-kind contribution description (if applicable)

9 Principal occupation

10 Employer (optional)

Date
9-13-01

Full name of contributor
Enrique Davilla, Jr. out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77098

Amount of contribution
1000.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-13-01

Full name of contributor
John E. Caldwell, III out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Pearland, Tx. 77584-5207

Amount of contribution
250.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-14-01

Full name of contributor
Wendell A. Robbins, Jr. out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Houston, Tx. 77096

Amount of contribution
200.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
9-14-01

Full name of contributor
Oliver Bromley out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Houston, Tx.

Amount of contribution
10.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-21-01

Full name of contributor
Clinton C. Jones, III out of state PAC

Contributor address: City; State; Zip Code
[REDACTED], Washington, DC 20001-1809

Amount of contribution
100.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

Date
8-11-01

Full name of contributor
Courtney A. Newman out of state PAC

Contributor address: City; State; Zip Code
[REDACTED] Hyattsville, MD 20782

Amount of contribution
125.00

In-kind contribution description (if applicable)

Principal occupation

Employer (optional)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 9-13-01	5 Payee name Ed Banks	7 Amount (\$) 150.00
6 Payee address: City: State: Zip Code: 3306 Beulah, Houston, Tx. 77004		
8 Purpose of expenditure Contract Services		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Eva Pickens	Amount (\$) 500.00
Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Citywide Beauticians, Inc.	Amount (\$) 225.00
Payee address: City: State: Zip Code: 19110 Cleyanna Ln., Humble, Tx. 77346		
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Academy Awards	Amount (\$) 893.60
Payee address: City: State: Zip Code: 4112 Fannin, Houston, Tx. 77004		
Purpose of expenditure T-Shirts and Bumper Sticker Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-14-01	Payee name Nata Koerber	Amount (\$) 500.00
Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004		
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-14-01	Payee name Nata Koerber	Amount (\$) 57.59
Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004		
Purpose of expenditure Reimbursement for Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-14-01	Payee name Booker T. Mooris	Amount (\$) 5000.00
Payee address: City: State: Zip Code: 2626 So. Loop West, Ste. 270, Houston, Tx. 77054		
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-2-01	5 Payee name Chase Bank 6 Payee address: City: State: Zip Code: 5445 Almeda, Houston, Tx. 77004	7 Amount (\$) 16.50
8 Purpose of expenditure Check Order		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-3-01	Payee name Ken McCowan Payee address: City: State: Zip Code: 3535 Briarpark Drive, Ste. 208, Houston, Tx. 77042	Amount (\$) 34.84
Purpose of expenditure Reimbursement for Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-3-01	Payee name Four Seasons Payee address: City: State: Zip Code: 1500 Lamar Street, Houston, Tx. 77010-3098	Amount (\$) 1087.63
Purpose of expenditure Fundraiser		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-5-01	Payee name Charles Simmons Payee address: City: State: Zip Code: 1703 Gentle Bend, Missouri City, Tx. 77459	Amount (\$) 180.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-6-01	Payee name Evangelist Temple Church Payee address: City: State: Zip Code: 11603 Martin Luther King, Houston, Tx. 77048	Amount (\$) 60.00
Purpose of expenditure Ad		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-6-01	Payee name Jack & Jill Payee address: City: State: Zip Code: N. Houston Suburban Chapter	Amount (\$) 100.00
Purpose of expenditure Ad		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-6-01	Payee name Faith Baptist Church Payee address: City: State: Zip Code:	Amount (\$) 100.00
Purpose of expenditure Ad		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

GERALD WOMACK

4 Date

5 Payee name

7 Amount

7-6-01

Advantage Communication

(\$)

6 Payee address: City: State: Zip Code:

600.00**4412 Almeda, Houston, Tx. 77004**

8 Purpose of expenditure

9 ** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Consultant

Date

Payee name

Amount

7-6-01

Southwestern Bell Telephone

(\$)

Payee address: City: State: Zip Code:

122.22**P. O. Box 1780, Houston, Tx. 77251**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Telephone Service

Date

Payee name

Amount

7-6-01

Nata Koerber

(\$)

Payee address: City: State: Zip Code:

600.00**1818 Calumet, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Consultant

Date

Payee name

Amount

7-6-01

Rev. J. J. Roberson

(\$)

Payee address: City: State: Zip Code:

100.00**Mt. Hebron Baptist Church**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Ads

Date

Payee name

Amount

7-6-01

Evangelist Chapel AME

(\$)

Payee address: City: State: Zip Code:

60.00**3401 Hondo, Houston, Tx. 77051**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Ads

Date

Payee name

Amount

7-9-01

Texas Printing

(\$)

Payee address: City: State: Zip Code:

6180.00**4716 Main, Houston, Tx. 77002**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Printing

Date

Payee name

Amount

7-11-01

Ken McCowan

(\$)

Payee address: City: State: Zip Code:

80.00**3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Reimbursement for Supplies

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POLITICAL EXPENDITURESSCHEDULE **F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-11-01	5 Payee name CDI Management Service 6 Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042	7 Amount (\$) 337.33
8 Purpose of expenditure Reimbursement for Cell Phone		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-11-01	Payee name Valerie Grooks Payee address: City: State: Zip Code:	Amount (\$) 100.00
Purpose of expenditure Ad for Ms Black Texas		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-13-01	Payee name DeRoyce Coleman Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 250.00
Purpose of expenditure Return of Contribution		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-13-01	Payee name Nata Koerber Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	Amount (\$) 500.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Hiram Clark Civic Club Payee address: City: State: Zip Code: 3831 Wuthering Heights, Houston, Tx. 77045	Amount (\$) 40.00
Purpose of expenditure Ad		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Nata Koerber Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	Amount (\$) 500.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Don Aaron Payee address: City: State: Zip Code: 500 McKinney Drive, Houston, Tx. 77002	Amount (\$) 9.00
Purpose of expenditure Reimbursement for Copies of Reports		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-20-01	5 Payee name Don Aaron 6 Payee address: City: State: Zip Code: 500 McKinney Drive, Houston, Tx. 77002	7 Amount (\$) 41.50
8 Purpose of expenditure Reimbursement for Copies of Reports		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Erica Fowler Payee address: City: State: Zip Code: 1910 Overbrook, Missouri City, Tx. 77459	Amount (\$) 143.30
Purpose of expenditure Reimbursement for Labels and Street Guide		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Provost & Associates Payee address: City: State: Zip Code: 3821 N. MacGregor Way, Houston, Tx. 77004	Amount (\$) 250.00
Purpose of expenditure Photos		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Bryon Hestor Payee address: City: State: Zip Code: 4407 Shadow Haven Dr., Houston, Tx.	Amount (\$) 125.00
Purpose of expenditure Fundraiser Entertainment		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Lobue's Rubberstamp Co. Payee address: City: State: Zip Code: 1228 McGowen, P. O. Box 52415, Houston, Tx. 77052	Amount (\$) 14.61
Purpose of expenditure Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Charles Simmons Payee address: City: State: Zip Code: 1703 Gentle Bend, Missouri City, Tx. 77459	Amount (\$) 65.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-20-01	Payee name Advantage Communication Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 600.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 7-24-01	5 Payee name Career & Recovery 6 Payee address: City: State: Zip Code: 2302 Fannin, Houston, Tx. 77002	7 Amount (\$) 500.00
8 Purpose of expenditure Banquet		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-26-01	Payee name Earnest McGowen Payee address: City: State: Zip Code: 4836 Milwee St., Houston, Tx. 77092	Amount (\$) 40.00
Purpose of expenditure Reimbursement for Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-27-01	Payee name St. Peter The Apostle Payee address: City: State: Zip Code: 6220 LaSalette Dr., Houston, Tx. 77021-1339	Amount (\$) 50.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-27-01	Payee name CityWide Beauticians, Inc. c/o Lillian Nickerson Payee address: City: State: Zip Code: 19110 Cleyanna Lane, Humble, Tx. 77346	Amount (\$) 100.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-27-01	Payee name Nata Koerber Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	Amount (\$) 500.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 7-22-01	Payee name Jack Yates Alumnis c/o John A. Gentry Payee address: City: State: Zip Code: 8050 Botany Lane, Houston, Tx. 77075	Amount (\$) 65.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-2-01	Payee name Texas Printing Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	Amount (\$) 539.09
Purpose of expenditure Printing		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-2-01	5 Payee name Quail Valley World of Ministers 6 Payee address: City: State: Zip Code: 2880 LaQuinta Dr., Missouri City, Tx.	7 Amount (\$) 93.55
8 Purpose of expenditure Breakfast Forum		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-2-01	Payee name Advantage Communication Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 600.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-2-01	Payee name CDI Management Service Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042	Amount (\$) 224.44
Purpose of expenditure Reimbursement for Cell Phone		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-2-01	Payee name Southwestern Bell Telephone Payee address: City: State: Zip Code: P. O. Box 1550, Houston, Tx. 77097-0047	Amount (\$) 116.02
Purpose of expenditure Telephone Service		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-2-01	Payee name Nata Koerber Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	Amount (\$) 500.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-3-01	Payee name Frenchy's Payee address: City: State: Zip Code: 3919 Scott Street, Houston, Tx. 77004	Amount (\$) 62.50
Purpose of expenditure Food for Meeting		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-8-01	Payee name Harris County Tejano Democrats Payee address: City: State: Zip Code: P. O. Box 668, Missouri City, Tx. 77459	Amount (\$) 250.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURESSCHEDULE **F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-10-01	5 Payee name Nata Koerber 6 Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	7 Amount (\$) 500.00
8 Purpose of expenditure Consultant		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-10-01	Payee name LaVita News Payee address: City: State: Zip Code: P. O. Box 307, Missouri City, Tx. 77459	Amount (\$) 300.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-10-01	Payee name Emera Ladino Payee address: City: State: Zip Code: 2605 Gregg, Houston, Tx. 77026	Amount (\$) 300.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-13-01	Payee name Erica Fowler Payee address: City: State: Zip Code: 1910 Overbrook, Missouri City, Tx. 77459	Amount (\$) 325.00
Purpose of expenditure Counselant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-13-01	Payee name Ken McCowen Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042	Amount (\$) 601.30
Purpose of expenditure Reimbursement for Supplies/Cell Phone		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-13-01	Payee name Hopewell Baptist Church Payee address: City: State: Zip Code: 7347 Joplin, Houston, Tx. 77011	Amount (\$) 150.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-15-01	Payee name Texas Printing Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	Amount (\$) 1537.15
Purpose of expenditure Printing		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURESSCHEDULE **F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-15-01	5 Payee name U.S. Postmaster	7 Amount (\$) 68.00
6 Payee address: City: State: Zip Code: 4110 Almeda, Houston, Tx. 77004		
8 Purpose of expenditure Postage		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-15-01	Payee name Chris Latson	Amount (\$) 250.00
Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77002		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-15-01	Payee name A.E. Gray Computers & Compers Ser.	Amount (\$) 100.00
Payee address: City: State: Zip Code: 3018 Hutchins, Houston, Tx. 77004		
Purpose of expenditure Computer Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-16-01	Payee name Harris County Clerk	Amount (\$) 19.90
Payee address: City: State: Zip Code: 301 Fannin, Houston, Tx. 77002		
Purpose of expenditure Voter's List		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-16-01	Payee name Don Arron	Amount (\$) 9.74
Payee address: City: State: Zip Code: 500 McKinney Dr., Houston, Tx. 77002		
Purpose of expenditure Reimbursement for Copies and Reports		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-16-01	Payee name Frenchy's	Amount (\$) 61.56
Payee address: City: State: Zip Code: 3919 Scott Street, Houston, Tx. 77004		
Purpose of expenditure Food for Meeting		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-16-01	Payee name Bering Memorial Church	Amount (\$) 75.00
Payee address: City: State: Zip Code: 1440 Harold Street, Houston, Tx. 77006		
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-17-01	5 Payee name Don Arron 6 Payee address: City: State: Zip Code: 500 McKinney Dr., Houston, Tx. 77002	7 Amount (\$) 2000.00
8 Purpose of expenditure Consultant		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name Ken McCowan Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042	Amount (\$) 100.00
Purpose of expenditure Reimbursement for Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name Erica Fowler Payee address: City: State: Zip Code: 1910 Overbrook, Missouri City, Tx. 77459	Amount (\$) 595.01
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name CDI Management Service Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042	Amount (\$) 222.10
Purpose of expenditure Reimbursement for Copies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name Nata Koerber Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	Amount (\$) 500.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name CASH Payee address: City: State: Zip Code: 5445 Almeda, Houston, Tx. 77004	Amount (\$) 20.00
Purpose of expenditure Supplies for Block Walkers		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-17-01	Payee name Advantage Communication Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 600.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURESSCHEDULE **F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-22-01	5 Payee name Harris County Council	7 Amount (\$) 250.00
6 Payee address: City: State: Zip Code: P. O. Box 668, Missouri City, Tx. 77459		
8 Purpose of expenditure Ads		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-22-01	Payee name St. Mary's United Methodist Church	Amount (\$) 50.00
Payee address: City: State: Zip Code: 6731 Scott, Houston, Tx. 77021		
Purpose of expenditure Ad		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-22-01	Payee name U.S. Postmaster	Amount (\$) 64.00
Payee address: City: State: Zip Code: 4110 Almeda, Houston, Tx. 77004		
Purpose of expenditure Postage		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-23-01	Payee name Hopewell Baptist Church	Amount (\$) 240.00
Payee address: City: State: Zip Code: 7347 Joplin, Houston, Tx. 77011		
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-23-01	Payee name Duni Hebron	Amount (\$) 250.00
Payee address: City: State: Zip Code: 5055 Westheimer, Houston, Tx. 77056		
Purpose of expenditure NAACP Youth Program Donation		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-23-01	Payee name Montrose Area Democrats	Amount (\$) 50.00
Payee address: City: State: Zip Code: 803 Hawthorne, Houston, Tx. 77006		
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-24-01	Payee name Nata Koerber	Amount (\$) 500.00
Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004		
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURESSCHEDULE **F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

GERALD WOMACK

4 Date

5 Payee name

7 Amount

8-24-01**Nata Koerber**

(\$)

6 Payee address: City: State: Zip Code:

500.00**1818 Calumet, Houston, Tx. 77004**

8 Purpose of expenditure

9 ** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Consultant

Date

Payee name

Amount

8-24-01**CASH**

(\$)

Payee address: City: State: Zip Code:

20.00**5445 Almeda, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Block Walker Supplies

Date

Payee name

Amount

8-28-01**U. S. Postmaster**

(\$)

Payee address: City: State: Zip Code:

204.00**4110 Almeda, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Postage

Date

Payee name

Amount

8-28-01**Chris Latson**

(\$)

Payee address: City: State: Zip Code:

250.00**4412 Almeda, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Contract Services

Date

Payee name

Amount

8-29-01**Frenchy's**

(\$)

Payee address: City: State: Zip Code:

53.69**3919 Scott Street, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Food for Meeting

Date

Payee name

Amount

8-29-01**Theresa LaCour**

(\$)

Payee address: City: State: Zip Code:

1250.00**2401 Westridge, Houston, Tx. 77054**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Consultant

Date

Payee name

Amount

8-29-01**Ed Banks**

(\$)

Payee address: City: State: Zip Code:

150.00**3306 Beulah, Houston, Tx. 77004**

Purpose of expenditure

** Complete if direct expenditure to benefit C/OH**

Candidate / Officeholder name

Office sought/held

Contract Services

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

GERALD WOMACK

4 Date 8-30-01	5 Payee name The Lady Tiger Bowling, TSU	7 Amount (\$) 350.00
6 Payee address: City: State: Zip Code: 3188 Cleburne, Houston, Tx. 77004		

8 Purpose of expenditure Ads	9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
--	---

Date 8-31-01	Payee name Nata Koerber	Amount (\$) 500.00
Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004		

Purpose of expenditure Consultant	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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Date 8-31-01	Payee name Frenchy's	Amount (\$) 62.35
Payee address: City: State: Zip Code: 3919 Scott Street, Houston, Tx. 77004		

Purpose of expenditure Food for Meeting	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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Date 8-31-01	Payee name Laos Christian Ministries	Amount (\$) 1000.00
Payee address: City: State: Zip Code: 5055 Bellfort, Houston, Tx. 77033		

Purpose of expenditure Ads	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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Date 8-31-01	Payee name Independent Missionary	Amount (\$) 200.00
Payee address: City: State: Zip Code: 4191 Bellaire Blvd., Houston, Tx. 77041		

Purpose of expenditure Ads	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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Date 8-31-01	Payee name The Lady Tiger Bowling-TSU	Amount (\$) 350.00
Payee address: City: State: Zip Code: 3100 Cleburne, Houston, Tx. 77004		

Purpose of expenditure Ads	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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Date 8-31-01	Payee name Advantage Communication	Amount (\$) 600.00
Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004		

Purpose of expenditure Consultant	** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8-31-01	5 Payee name CDI Management Service	7 Amount (\$) 241.49
6 Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77004		
8 Purpose of expenditure Reimbursement for Cell Phone		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-31-01	Payee name Southwestern Bell Telephone	Amount (\$) 131.56
6 Payee address: City: State: Zip Code: P. O. Box 1550, Houston, Tx. 77097-0047		
Purpose of expenditure Telephone Service		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-31-01	Payee name Byron Hester	Amount (\$) 125.00
6 Payee address: City: State: Zip Code:		
Purpose of expenditure Fundraiser Entertainment		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 8-31-01	Payee name Wyatt Cafeterias	Amount (\$) 849.01
6 Payee address: City: State: Zip Code: 10726 Plans Rd., P.O. Box 38388, Houston, Tx. 75238		
Purpose of expenditure Dr. Clark's Breakfast Forum		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-1-01	Payee name Toner Central Warehouse	Amount (\$) 143.77
6 Payee address: City: State: Zip Code:		
Purpose of expenditure Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-1-01	Payee name Robert Sye	Amount (\$) 50.00
6 Payee address: City: State: Zip Code: 7404 Chenever, Houston, Tx. 77004		
Purpose of expenditure Photos		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-5-01	Payee name Ed Banks	Amount (\$) 150.00
6 Payee address: City: State: Zip Code: 3306 Beulah, Houston, Tx. 77004		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 9-7-01	5 Payee name Nata Koerber 6 Payee address: City: State: Zip Code: 1818 Calumet, Houston, Tx. 77004	7 Amount (\$) 500.00
8 Purpose of expenditure Consultant		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name U.S. Postmaster Payee address: City: State: Zip Code: 4110 Almeda, Houston, Tx. 77004	Amount (\$) 340.00
Purpose of expenditure Postage		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name CASH Payee address: City: State: Zip Code: 5445 Almeda, Houston, Tx. 77004	Amount (\$) 20.00
Purpose of expenditure Block Walker Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name Robert Sye Payee address: City: State: Zip Code: 5407 Chenevert, Houston, Tx. 77004	Amount (\$) 50.00
Purpose of expenditure Photos		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name Mt. Moriah Missionary Payee address: City: State: Zip Code: 4730 Pederson, Houston, Tx. 77033	Amount (\$) 125.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name LaVide News Payee address: City: State: Zip Code: P. O. Box 307, Missouri City, Tx. 77459	Amount (\$) 200.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-7-01	Payee name Chris Latson Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 250.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 9-7-01	5 Payee name A.B. Chambers 6 Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	7 Amount (\$) 20.00
8 Purpose of expenditure Tickets		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-8-01	Payee name Copy Fax Payee address: City: State: Zip Code:	Amount (\$) 27.60
Purpose of expenditure Printing and Reproduction		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-10-01	Payee name Office Depot Payee address: City: State: Zip Code: 6883 Gulf Freeway, Ste. 300, Houston, Tx. 77087	Amount (\$) 501.12
Purpose of expenditure Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-10-01	Payee name Office Depot Payee address: City: State: Zip Code: 6883 Gulf Freeway, Ste. 300, Houston, Tx. 77087	Amount (\$) 48.50
Purpose of expenditure Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-12-01	Payee name Hiram Clark Civic Club Payee address: City: State: Zip Code:	Amount (\$) 140.00
Purpose of expenditure Ads		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Advantage Communication Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 600.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Texas Sign and Display Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	Amount (\$) 431.98
Purpose of expenditure Printing and Reproduction		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 9-13-01	5 Payee name Texas Sign and Display 6 Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	7 Amount (\$) 1962.92
8 Purpose of expenditure Printing and Reproduction		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Texas Sign and Display Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	Amount (\$) 670.07
Purpose of expenditure Printing and Reproduction		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Texas Sign and Display Payee address: City: State: Zip Code: 4715 Main, Houston, Tx. 77002	Amount (\$) 256.56
Purpose of expenditure Printing and Reproduction		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Sherry Browning Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004	Amount (\$) 350.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Sherry Browning Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77002	Amount (\$) 400.00
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Erica Fowler Payee address: City: State: Zip Code: 1910 Overbrook, Missouri City, Tx. 77459	Amount (\$) 345.91
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-13-01	Payee name Erica Fowler Payee address: City: State: Zip Code: 1910 Overbrook, Missouri City, Tx. 77459	Amount (\$) 225.00
Purpose of expenditure Consultant		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 19
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 9-14-01	5 Payee name Ken McCowan	7 Amount (\$) 23.79
6 Payee address: City: State: Zip Code: 3535 Briarpark Dr., Ste. 208, Houston, Tx. 77042		
8 Purpose of expenditure Reimbursement for Supplies		9 ** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-14-01	Payee name CASH	Amount (\$) 500.00
Payee address: City: State: Zip Code: 5445 Almeda, Houston, Tx. 77004		
Purpose of expenditure Filing Fee		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-17-01	Payee name Office Depot	Amount (\$) 157.28
Payee address: City: State: Zip Code: 6883 Gulf Freeway, Ste. 300, Houston, Tx. 77087		
Purpose of expenditure Supplies		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-17-01	Payee name Brenda Davis	Amount (\$) 350.00
Payee address: City: State: Zip Code:		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-18-01	Payee name Alicia Murray	Amount (\$) 395.00
Payee address: City: State: Zip Code: 4042 McDermed, Houston, Tx. 77052		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-18-01	Payee name Chris Latson	Amount (\$) 1200.00
Payee address: City: State: Zip Code: 4412 Almeda, Houston, Tx. 77004		
Purpose of expenditure Contract Services		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held
Date 9-18-01	Payee name Arthur Gray	Amount (\$) 225.00
Payee address: City: State: Zip Code: 3018 Hutchins, Houston, Tx. 77004		
Purpose of expenditure Computer Installation/Repairs		** Complete if direct expenditure to benefit C/OH** Candidate / Officeholder name Office sought/held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

3 ACCOUNT # (Ethics Commission files)

GERALD WOMACK

4 Date

9-18-01

5 Payee name

Fred Robertson

6 Payee address: City: State: Zip Code:

10619 Sorsby, Houston, Tx. 770477 Amount
(\$)**250.00**

8 Purpose of expenditure

Contract Services

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

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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: 1
2 FILER NAME GERALD WOMACK		3 ACCOUNT # (Ethics Commission filers)
4 Date 8/22/01	5 Payee name GERALD WOMACK ----- 6 Payee address: City: State: Zip Code 4412 Almeda, Houston, Texas 77004 ----- 7 Purpose of expenditure Supplies Reimbursement	8 Amount \$ 50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8/22/01	Payee name GERALD WOMACK ----- Payee address: City: State: Zip Code 4412 Almeda, Houston, Texas 77004 ----- Purpose of expenditure Supplies Reimbursement	Amount \$ 52.17 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8/23/01	Payee name GERALD WOMACK ----- Payee address: City: State: Zip Code 4412 Almeda, Houston, Texas 77004 ----- Purpose of expenditure Postage Reimbursement	Amount \$ 102.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 8/31/01	Payee name GERALD WOMACK ----- Payee address: City: State: Zip Code 4412 Almeda, Houston, Tx. 77004 ----- Purpose of expenditure Supplies Reimbursement	Amount \$ 113.53 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name ----- Payee address: City: State: Zip Code ----- Purpose of expenditure	Amount \$ <input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED