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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 12

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

RECEIVED OCT 27 2003 CITY SECRETARY

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR (MR circled) FIRST: Mills MI: NICKNAME: LAST: Worsham SUFFIX:
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 10043 Del Monte Houston, Texas 77042
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (713) PHONE NUMBER: 805-3393 EXTENSION:
6 CAMPAIGN TREASURER NAME	MS / MRS / MR (MRS circled) FIRST: Roxanne MI: NICKNAME: LAST: Worsham SUFFIX:
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE: SAME AS ABOVE
8 CAMPAIGN TREASURER PHONE	AREA CODE: (713) PHONE NUMBER: 914-0010 EXTENSION:
9 REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☑ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year: 10 / 1 / 03 THROUGH Month Day Year: 10 / 26 / 03
11 ELECTION	ELECTION DATE Month Day Year: 11 / 4 / 03 ELECTION TYPE: ☐ Primary ☐ Runoff ☑ General ☐ Special
12 OFFICE	OFFICE HELD (if any): — 13 OFFICE SOUGHT (if known): Houston City Council - Dist. G
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS ☐ additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name: Address / PO Box; Apt. / Suite #; City; State; Zip Code:

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME: Mills Worsham

16 ACCOUNT # (Ethics Commission filers):

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4,330.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4.	TOTAL POLITICAL EXPENDITURES	$ 9,770.78
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 159.78
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

19 AFFIDAVIT

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

JENNIFER J. HIGGINS
MY COMMISSION EXPIRES
January 31, 2007

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mills Worsham this the 27 day of October, 20 03, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Jennifer Higgins | Title of officer administering oath: PBR

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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 this Schedule A:

2 FILER NAME Mills Worsham

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/1/03	Jane P. Stewart 6 Contributor address: City: State: Zip Code [redacted]	$ 100.00	
9 Principal occupation \ Job title (See Intructions)	10 Employer (See Instructions)		

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/1/03	Alvin Owsley Contributor address: City: State: Zip Code [redacted]	$ 200.00	
Principal occupation \ Job title (See Intructions)	Employer (See Instructions)		

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/2/03	Ross G. Baker Contributor address: City: State: Zip Code [redacted]	$ 100.00	
Principal occupation \ Job title (See Intructions)	Employer (See Instructions)		

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/2/03	William S. Banks III, M.D. Contributor address: City: State: Zip Code [redacted]	$ 50.00	
Principal occupation \ Job title (See Intructions)	Employer (See Instructions)		

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/4/03	Mrs. Theodore W. Cooper Contributor address: City: State: Zip Code [redacted]	$ 50.00	
Principal occupation \ Job title (See Intructions)	Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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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 this Schedule A:

2 FILER NAME: Mrs Worsham

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/4/03	Anna J. Olexy [redacted]	$100.00	

9 Principal occupation \ Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/5/03	Barbara Pitson [redacted]	$500.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/6/03	Beverly B. Lane [redacted]	$50.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/03	James W. Hargrove [redacted]	$200.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/8/03	Stephen M. Reckling [redacted]	$500.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages this Schedule A:

2 FILER NAME: Mrs Worsham

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/9/03	Lyl Coxe Harvin [redacted]	$100.00	

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

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/11/03	J.S. Sellingsloh [redacted]	$50.00	

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

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/03	James W. Roach [redacted]	$50.00	

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

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/03	Delta H. Thompson [redacted]	$100.00	

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

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/15/03	Robert L. Bradley [redacted]	$250.00	

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

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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 this Schedule A:

2 FILER NAME: Mills Worsham

3 ACCOUNT # (Ethics Commission filer)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/15/03	Charles E. Cook [redacted]	$100.00	
	9 Principal occupation \ Job title (See Instructions)	10 Employer (See Instructions)	
10/15/03	Louise Ewing Erwin [redacted]	$50.00	
	Principal occupation \ Job title (See Instructions)	Employer (See Instructions)	
10/15/03	Andrew D. Kreston [redacted]	$400.00	
	Principal occupation \ Job title (See Instructions)	Employer (See Instructions)	
10/15/03	Barbara W. Mercier [redacted]	$200.00	
	Principal occupation \ Job title (See Instructions)	Employer (See Instructions)	
10/14/03	Yance S. Montalbano [redacted]	$200.00	
	Principal occupation \ Job title (See Instructions)	Employer (See Instructions)	

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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 this Schedule A:

2 FILER NAME Mills Worsham

3 ACCOUNT # (Ethics Commission filer)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/14/03	Danette Scheffler [redacted]	$ 100.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/03	Stephen Robert Schneider [redacted]	$ 100.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/03	Kim M. Swent [redacted]	$ 150.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/03	Kay R. Hawton [redacted]	$ 30.00	

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

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/03	Kerry M. McKay [redacted]	$ 100.00	

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

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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 this Schedule A:

2 FILER NAME Mike Worsham

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/17/03	Patsy McLean [redacted]	$25.00	

9 Principal occupation \ Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/17/03	Paula S. Thomas [redacted]	$100.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/03	Nancy Koll Noonan [redacted]	$50.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/03	Michele D. Reiter [redacted]	$25.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/22/03	Sabitha V. Panthagani [redacted]	$50.00	

Principal occupation \ Job title (See Instructions) Employer (See Instructions)

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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 this Schedule A:

2 FILER NAME Mills Worsham

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/19/03	Mrs. Charles J. Hooper	[redacted]	$50.00	

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/03	Thomas O. Arnold	[redacted]	$100.00	

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/03	Judy B. Mills	[redacted]	$100.00	

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Mills Worsham

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/1/03	Briarsgrove Elementary PTO	$500.00

8 Purpose of payment (See instructions regarding type of information required.): carnival sponsor

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/7/03	Triton Communications	$1,044.62

Purpose of payment (See instructions regarding type of information required.): campaign website

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/7/03	Pressler + Co.	$1,200.00

Purpose of payment (See instructions regarding type of information required.): consulting

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/8/03	Sprint Postal Print	$703.00

Purpose of payment (See instructions regarding type of information required.): 4 x 8 signs

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

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Mike Worsham

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/03	Verizon Wireless	$ 435.47

8 Purpose of payment (See instructions regarding type of information required.): cell phone

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/17/03	Matthew Keller	$ 50.00

Purpose of payment (See instructions regarding type of information required.): sign labor

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/18/03	Sprint Postal Print	$ 703.00

Purpose of payment (See instructions regarding type of information required.): 4' x 8' signs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/23/03	Pressler & Co.	$ 1,221.88

Purpose of payment (See instructions regarding type of information required.): push cards

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

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Mills Worsham

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/24/03	Pressler + Co.	3,912.81

8 Purpose of payment (See instructions regarding type of information required.)	9 – Complete if direct expenditure to benefit C/OH – Candidate / Officeholder name / Office sought / Office held
advertising	

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

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

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

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

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

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

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