

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS **FORM C/OH COVER SHEET PG 2**

14 C/OH NAME Alvarado, Carol (Ms.) **15 ACCOUNT #** (Ethics Commission filers) 1980

16 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. ..

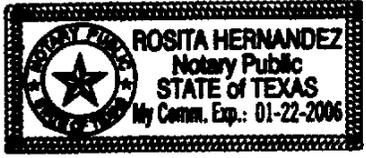
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 76,717.92
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 34,748.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 321,672.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 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.



Carol Alvarado
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CAROL ALVARADO, this the 11th day of October, 2005, to certify which, witness my hand and seal of office.

Rosita Hernandez Rosita Hernandez NOTARY PUBLIC
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/21 Report: 3/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/12/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Allen, Steve 6 Contributor address; City; State; Zip Code ██████████ Houston, TX 77005	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/05/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Aramark PAC Contributor address; City; State; Zip Code ██████████ Philadelphia, PA 19107	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bailey, Marlene Contributor address; City; State; Zip Code ██████████ Palm Springs, CA 92263	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bodin, Mike Contributor address; City; State; Zip Code ██████████ Houston, TX 77023	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bowers, Timothy Contributor address; City; State; Zip Code ██████████ Houston, TX 77087	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/21 Report: 4/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/24/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brady, Gerald 6 Contributor address; City; State; Zip Code Houston, TX 77291	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See instructions)		10 Employer (See instructions)	
Date 09/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brennan, Jacquie Contributor address; City; State; Zip Code Houston, TX 77023	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 09/12/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brown, Lee Contributor address; City; State; Zip Code Houston, TX 77057	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brown, Naomi Contributor address; City; State; Zip Code Houston, TX 77012	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 08/23/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cavazos, Sylvia (Ms.) Contributor address; City; State; Zip Code Houston, TX 77009	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/21 Report: 5/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 08/08/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CDMPAC 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Centerpoint Energy, Inc. PAC Contributor address; City; State; Zip Code Houston, TX 77210	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chapman, Charles Jr. Contributor address; City; State; Zip Code Houston, TX 77020	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cheng, Andrew Contributor address; City; State; Zip Code Rosemead, CA 91770	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Citizens for Antonio (Tony) Munoz Contributor address; City; State; Zip Code Chicago, IL 60609	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/21 Report: 6/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 07/22/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Citizens for Edward Acevedo 6 Contributor address; City; State; Zip Code [REDACTED] Chicago, IL 60608	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/01/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cole, Donna (Ms.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77077	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/03/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Contreras, Art Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77052	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CWA - COPE PCC Contributor address; City; State; Zip Code [REDACTED] Washington, DC 20001	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) De La Garza, Elias Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/21 Report: 7/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 08/08/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) De La Mora, Peter (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77459	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Diaz, Norma Yvette Contributor address; City; State; Zip Code Houston, TX 77023	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/14/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Drake, Jack (Mr.) Contributor address; City; State; Zip Code Houston, TX 77060	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Drexler, Clyde Contributor address; City; State; Zip Code Houston, TX 77003	Amount of contribution (\$) \$4,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/30/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Drexler, Clyde Contributor address; City; State; Zip Code Houston, TX 77003	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/21 Report: 8/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/29/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ek, John 6 Contributor address; City; State; Zip Code [REDACTED] San Pedro, CA 90732	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/12/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fillip, J.R. (Mr.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77087	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/18/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fillip, J.R. (Mr.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77087	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/16/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Foster Midkiff, Sabrina (Ms.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77019	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fraga, Michele Contributor address; City; State; Zip Code [REDACTED] Sugar Land, TX 77478	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/21 Report: 9/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 07/22/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Friends of George Cardenas 6 Contributor address; City; State; Zip Code [REDACTED] Chicago, IL 60623	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) G & A Investments Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77084	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gaubert, Vesta Rea (Ms.) Contributor address; City; State; Zip Code [REDACTED] Spring, TX 77379	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gomez, Michael Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77056	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hagstette, Guy Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77002	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/21 Report: 10/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 07/10/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hansen, Mary Margaret (Ms.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hernandez, Sofia (Ms.) Contributor address; City; State; Zip Code [REDACTED] New York, NY 10025	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hispanic Democratic Organization Contributor address; City; State; Zip Code [REDACTED] Chicago, IL 60606	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/14/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hobby, Paul W. (Mr.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77019	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Horn, Donald Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77004	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/21 Report: 11/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/20/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Houston Council of Engineering Companies PAC 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of contribution (\$) \$7,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Houston Police Officers Union PAC Account Contributor address; City; State; Zip Code Houston, TX 77007	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) I.K.E. Enterprises Contributor address; City; State; Zip Code Houston, TX 77231	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) IEC of Houston PAC Contributor address; City; State; Zip Code Houston, TX 77007	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) ILA Local 1351 Political Interest Committee Contributor address; City; State; Zip Code Houston, TX 77012	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/21 Report: 12/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 08/30/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) International Longshoremen's Assoc. Committee on Political Ed. 6 Contributor address; City; State; Zip Code New York, NY 10004	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/21/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jard, James Contributor address; City; State; Zip Code Houston, TX 77024	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Johnson, Steven Contributor address; City; State; Zip Code Long Beach, CA 90814	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/10/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jozwiak, Michael (Mr.) Contributor address; City; State; Zip Code Houston, TX 77061	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/06/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) JYC Partners Contributor address; City; State; Zip Code Houston, TX 77075	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/21 Report: 13/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/28/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kerr, Carol 6 Contributor address; City; State; Zip Code [REDACTED] Los Angeles, CA 90064	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) King, Dana Contributor address; City; State; Zip Code [REDACTED] Solana Beach, CA 92075	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kostrencich, John (Mr.) Contributor address; City; State; Zip Code [REDACTED] Rancho Palos Verdes, CA 90275	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/14/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kvinta, W.D. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77227	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Laredo National Bank Contributor address; City; State; Zip Code [REDACTED] Laredo, TX 78042	Amount of contribution (\$) \$1,402.92	In-kind contribution description (if applicable) Interest on account
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/21 Report: 14/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 09/12/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lawal, Kamoru 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lawing, Douglas Contributor address; City; State; Zip Code Houston, TX 77002	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lieb, Richard Contributor address; City; State; Zip Code Solana Beach, CA 92075	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/23/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code Austin, TX 78760	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lopez, Arthur Contributor address; City; State; Zip Code Houston, TX 77017	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/21 Report: 15/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 07/01/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lopez, James (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77011	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lopez, James (Mr.) Contributor address; City; State; Zip Code Houston, TX 77011	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martinez, David F. Contributor address; City; State; Zip Code Houston, TX 77060	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martinez, David F. Contributor address; City; State; Zip Code Houston, TX 77060	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/13/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mayfield, C. W, Jr, Contributor address; City; State; Zip Code Houston, TX 77023	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/21 Report: 16/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/17/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McGee, Olga (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/18/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Melchor, Max Contributor address; City; State; Zip Code Houston, TX 77037	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Monty, Jacob Contributor address; City; State; Zip Code Houston, TX 77084	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moran, Rex Contributor address; City; State; Zip Code Houston, TX 77020	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Naleo Educational Fund Contributor address; City; State; Zip Code Los Angeles, CA 90015	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) Reimbursement for travel to National Conference
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/21 Report: 17/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/17/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Newlin, Richard 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/12/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Niemeier, Karen (Ms.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/03/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Parker, Steven Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Parker, Steven Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paseman, Richard Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/21 Report: 18/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 09/21/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patout, Rivers (Rev.) 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77012	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Peeler, John Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77021	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Peters, Brenda J. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77004	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/12/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Petheriotes, James Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pipefitters Local Union No. 211 C.O.P.E. Account Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77017	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/21 Report: 19/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 08/25/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Quijano, Nelly 6 Contributor address; City; State; Zip Code Houston, TX 77504	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramming, Lawrence Contributor address; City; State; Zip Code Houston, TX 77027	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reilly, Patrick Contributor address; City; State; Zip Code San Diego, CA 92131	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reimondo, Geroid Contributor address; City; State; Zip Code Houston, TX 77087	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sabouni, Lina (Mrs.) Contributor address; City; State; Zip Code Sugahand, TX 77479	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/21 Report: 20/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980	
4 Date 09/28/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Saenz, Gracie 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77023	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/22/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sandoval, Alexander (Mr.) Contributor address; City; State; Zip Code [REDACTED] Dublin, CA 94568	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) SEIU C.O.P.E. Contributor address; City; State; Zip Code [REDACTED] Washington, DC 20005	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sellers Brothers Investments, Ltd. Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77087	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Simon, Harry Elliot (Mr.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77011	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/21 Report: 21/36	
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/29/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Spiegel, David 6 Contributor address; City; State; Zip Code [REDACTED] Sherman Oaks, CA 91423	7 Amount of contribution (\$) \$3,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/10/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thodos, Maria (Ms.) Contributor address; City; State; Zip Code [REDACTED] Huntsville, TX 77340	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vargo, Mary (Ms.) Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77207	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Villareal, Lillian Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77087	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Viterbi, Alan Contributor address; City; State; Zip Code [REDACTED] San Diego, CA 92130	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/21 Report: 22/36	
2 FILER NAME Avarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980	
4 Date 09/17/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Walker, Joe 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/12/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wallace, Judy Contributor address; City; State; Zip Code Houston, TX 77025	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William R. Franks Investments Contributor address; City; State; Zip Code Houston, TX 77068	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wilson, J.S. Contributor address; City; State; Zip Code San Pedro, CA 90731	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/28/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wilson, Marcus Contributor address; City; State; Zip Code Newport Beach, CA 92663	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 21/21 Report: 23/36

2 FILER NAME Alvarado, Carol (Ms.)

3 ACCOUNT # (Ethics Commission filers)
1980

4 Date **5 Full name of contributor** out-of-state PAC(ID# _____)
09/29/2005 Wilson, Nick

7 Amount of contribution (\$)
\$500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
Mission Viejo, CA 92692

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date **Full name of contributor** out-of-state PAC(ID# _____)
09/27/2005 Wilson, Winter

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Long Beach, CA 90814

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **Full name of contributor** out-of-state PAC(ID# _____)
09/15/2005 Yoars, John

Amount of contribution (\$)
\$200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
The Woodlands, TX 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **Full name of contributor** out-of-state PAC(ID# _____)
08/08/2005 Zarinkelk, Giti

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
Spring, TX 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/13 Report: 24/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 09/01/2005	5 Payee name A and E Printing 6 Payee address; City; State; Zip Code 4235 Richmond Houston, TX 77027	7 Amount (\$) \$146.14
8 Purpose of payment (See instructions regarding type of information required.) Printing of Alvarado banner		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/07/2005	Payee name Alvarado, Carol (Ms.) Payee address; City; State; Zip Code 9213 E. Ave. L Houston, TX 77012	Amount (\$) \$1,097.94
Purpose of payment (See instructions regarding type of information required.) Travel for Annual NALEO Conference and Los Angeles Mayoral Innaugural		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/14/2005	Payee name Alvarado, Carol (Ms.) Payee address; City; State; Zip Code 9213 E. Ave. L Houston, TX 77012	Amount (\$) \$1,081.99
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - travel and lodging for Chicago event.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/21/2005	Payee name Andover-Fairlawn-Southview Civic Club Payee address; City; State; Zip Code P.O.Box 266634 Houston, TX 77207	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Sponsorship of annual scholarship dance.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/13 Report: 25/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 07/18/2005	5 Payee name Be Bilingual, Inc. 6 Payee address; City; State; Zip Code 510 Bering Dr., Suite 300 Houston, TX 77057-1400	7 Amount (\$) \$32.50
8 Purpose of payment (See instructions regarding type of information required.) Translation services.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/07/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$1,461.38
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - purchase of yard signs.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/07/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$2,500.00
Purpose of payment (See instructions regarding type of information required.) Consultation fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/15/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$619.39
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - printing, postage, copies, photos & film		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/13 Report: 26/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980
4 Date 08/05/2005	5 Payee name Campos Communications 6 Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	7 Amount (\$) \$664.80
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - sign distribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/05/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$2,500.00
Purpose of payment (See instructions regarding type of information required.) Consultation fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/10/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$202.05
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - purchase of stick-ons.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/23/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$379.20
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - postage and copies.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/13 Report: 27/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980
4 Date 09/01/2005	5 Payee name Campos Communications 6 Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	7 Amount (\$) \$2,500.00
8 Purpose of payment (See instructions regarding type of information required.) Consultation fee.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/03/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$505.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - cashiers check for filing fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/09/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$441.29
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - postage & copies.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/14/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$385.99
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/13 Report: 28/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 09/14/2005	5 Payee name Campos Communications 6 Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	7 Amount (\$) \$679.73
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - postage & copies.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/14/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$800.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - sign distribution.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/21/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$520.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - printing.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/21/2005	Payee name Campos Communications Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008	Amount (\$) \$740.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - postage.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/13 Report: 29/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 07/08/2005	5 Payee name Carroll Printing 6 Payee address; City; State; Zip Code 2907 Canal Houston, TX 77003	7 Amount (\$) \$336.55
8 Purpose of payment (See instructions regarding type of information required.) Printing of Alvarado pencils		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/23/2005	Payee name Cingular Wireless Payee address; City; State; Zip Code P.O. Box 650574 Dallas, TX 75265-0574	Amount (\$) \$364.68
Purpose of payment (See instructions regarding type of information required.) Cell phone invoice		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/26/2005	Payee name Cingular Wireless Payee address; City; State; Zip Code P.O. Box 650574 Dallas, TX 75265-0574	Amount (\$) \$255.00
Purpose of payment (See instructions regarding type of information required.) Cell phone invoice		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/01/2005	Payee name Constable May Walker Scholarship Fund Payee address; City; State; Zip Code 5300 Griggs Houston, TX 77021	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Hole sponsorship for scholarship golf tournament		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/13 Report: 30/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 07/08/2005	5 Payee name Garces, Graciana 6 Payee address; City; State; Zip Code 9550 Ella Lee Lane Houston, TX 77063	7 Amount (\$) \$87.33
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - supplies for Fathers Day events		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/01/2005	Payee name Gemini Graphics Payee address; City; State; Zip Code 5303 Lyons Ave. Houston, TX 77020	Amount (\$) \$600.00
Purpose of payment (See instructions regarding type of information required.) Printing of Alvarado T-Shirts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/15/2005	Payee name George Alan Company Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	Amount (\$) \$433.00
Purpose of payment (See instructions regarding type of information required.) Printing of Alvarado fans		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/26/2005	Payee name George Alan Company Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	Amount (\$) \$400.53
Purpose of payment (See instructions regarding type of information required.) Balance for printing of Alvarado fans		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/13 Report: 31/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 08/10/2005	5 Payee name George Alan Company 6 Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	7 Amount (\$) \$300.00
8 Purpose of payment (See instructions regarding type of information required.) Down payment for Alvarado coffee mugs		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/15/2005	Payee name George Alan Company Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	Amount (\$) \$700.00
Purpose of payment (See instructions regarding type of information required.) Down payment for additional Alvarado fans		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/17/2005	Payee name George Alan Company Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	Amount (\$) \$305.07
Purpose of payment (See instructions regarding type of information required.) Balance for coffee mugs		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/23/2005	Payee name George Alan Company Payee address; City; State; Zip Code 603 West 11th St. Houston, TX 77028	Amount (\$) \$796.02
Purpose of payment (See instructions regarding type of information required.) Balance for printing of Alvarado fans.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/13 Report: 32/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 09/21/2005	5 Payee name Goth, Tessa (Ms.) 6 Payee address; City; State; Zip Code 3707 Mulberry #2 Houston, TX 77006	7 Amount (\$) \$271.25
8 Purpose of payment (See instructions regarding type of information required.) Photography services.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/20/2005	Payee name Greater Houston Convention & Visitor's Bureau Payee address; City; State; Zip Code 901 Bagby, 1st Floor Houston, TX 77002	Amount (\$) \$97.27
Purpose of payment (See instructions regarding type of information required.) Materials for fundraising reception		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/11/2005	Payee name Hernandez, Rosie (Ms.) Payee address; City; State; Zip Code 11881 Gulf Pointe Drive #L21 Houston, TX 77069	Amount (\$) \$23.82
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - Council Pastry Day		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/08/2005	Payee name Houston Katrina Relief Fund Payee address; City; State; Zip Code 10000 Memorial Drive, Suite 900 Houston, TX 77024	Amount (\$) \$1,000.00
Purpose of payment (See instructions regarding type of information required.) Donation for Katrina relief efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/13 Report: 33/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 08/16/2005	5 Payee name Mandola's Deli 6 Payee address; City; State; Zip Code 4105 Leeland Houston, TX 77023	7 Amount (\$) \$55.92
8 Purpose of payment (See instructions regarding type of information required.) Catering for campaign meeting.		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/14/2005	Payee name Orianna Diaz Payee address; City; State; Zip Code 1402 Columbia Houston, TX 77008	Amount (\$) \$1,500.00
Purpose of payment (See instructions regarding type of information required.) Contract labor.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/01/2005	Payee name Our Lady of Guadalupe Church Payee address; City; State; Zip Code 2405 Navigation Houston, TX 77003	Amount (\$) \$50.00
Purpose of payment (See instructions regarding type of information required.) Donation for church float.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/08/2005	Payee name Perez, John (Mr.) Payee address; City; State; Zip Code 7723 Elm St. Houston, TX 77023	Amount (\$) \$1,000.00
Purpose of payment (See instructions regarding type of information required.) Contract labor - sign distribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/13 Report: 34/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 1980
4 Date 09/02/2005	5 Payee name Perez, John (Mr.) 6 Payee address; City; State; Zip Code 7723 Elm St. Houston, TX 77023	7 Amount (\$) \$900.00
8 Purpose of payment (See instructions regarding type of information required.) Contract labor - sign distribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/21/2005	Payee name Perez, John (Mr.) Payee address; City; State; Zip Code 7723 Elm St. Houston, TX 77023	Amount (\$) \$800.00
Purpose of payment (See instructions regarding type of information required.) Contract labor - sign distribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/14/2005	Payee name Re-Ward Third Ward Payee address; City; State; Zip Code 3202 Trulley St. Houston, TX 77004	Amount (\$) \$375.00
Purpose of payment (See instructions regarding type of information required.) Sponsorship for 10th Anniversary program.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/15/2005	Payee name Rodriguez, James (Mr.) Payee address; City; State; Zip Code 7814 Moline Houston, TX 77087	Amount (\$) \$232.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - cell phone.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/13 Report: 35/36
2 FILER NAME Alvarado, Carol (Ms.)		3 ACCOUNT # (Ethics Commission files) 1980
4 Date 07/08/2005	5 Payee name Sprint Digital 6 Payee address; City; State; Zip Code 10100 Clay Rd. Houston, TX 77080	7 Amount (\$) \$1,461.37
8 Purpose of payment (See instructions regarding type of information required.) Printing of yard signs		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/11/2005	Payee name Sprint Digital Payee address; City; State; Zip Code 10100 Clay Rd. Houston, TX 77080	Amount (\$) \$1,568.63
Purpose of payment (See instructions regarding type of information required.) Printing of yard signs		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/23/2005	Payee name Sprint Digital Payee address; City; State; Zip Code 10100 Clay Rd. Houston, TX 77080	Amount (\$) \$202.05
Purpose of payment (See instructions regarding type of information required.) Balance on printing of stick-ons.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/23/2005	Payee name Sprint Digital Payee address; City; State; Zip Code 10100 Clay Rd. Houston, TX 77080	Amount (\$) \$1,461.38
Purpose of payment (See instructions regarding type of information required.) Deposit for printing of yard signs.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 13/13 Report: 36/36

2 FILER NAME Alvarado, Carol (Ms.)

3 ACCOUNT # (Ethics Commission filers)
1980

4 Date	5 Payee name Sprint Digital	7 Amount (\$)
09/09/2005	6 Payee address; City; State; Zip Code 10100 Clay Rd. Houston, TX 77080	\$1,461.37

8 Purpose of payment (See instructions regarding type of information required.) Balance on printing of yard signs.	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Villarreal, Lillian (Ms.)	Amount (\$)
09/17/2005	Payee address; City; State; Zip Code 7602 Vista Verde Houston, TX 77087	\$102.53

Purpose of payment (See instructions regarding type of information required.) Reimbursement for expenses - catering for meet and greet.	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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