

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:
3 CANDIDATE / OFFICEHOLDER NAME	TITLE	FIRST	MI
	NICKNAME	LAST	SUFFIX
Sylvia Garcia		R.	
OFFICE USE ONLY		Date Received	
4 CANDIDATE / OFFICEHOLDER ADDRESS		Date Hand-delivered or Date Postmarked	
<input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 8530 Houston, TX 77249-8530		Receipt # Amount Date Processed Date Imaged	
5 CAMPAIGN TREASURER NAME	TITLE	FIRST	MI
	NICKNAME	LAST	SUFFIX
Roland Garcia, Jr.			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)		ZIP CODE	
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;		600 Travis Houston, TX 77002-3095	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	226-1200	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month	Day	Year
	9	28	01
	THROUGH		Month
			Day
			Year
			10
			27
			01
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	11	6	01
	<input type="checkbox"/> Primary		<input type="checkbox"/> Runoff
	<input checked="" type="checkbox"/> General		<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	Houston City Controller		Houston City Controller
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **		
	Name		
	Address / PO Box; Apt. / Suite #; City; State; Zip Code		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Sylvia Garcia	15 ACCOUNT # (Ethics Commission file)
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16 SUPPORTING POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	- This listing includes 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	COMMITTEE NAME
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 NO REPORTABLE ACTIVITY 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)	\$ 11,120.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 820.27
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sylvia Garcia
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Sylvia P. Garcia, this the 25th day of October, 2001, to certify which, witness my hand and seal of office.

Ella M. Schubert
Signature of officer administering oath

Ella M. Schubert
Printed name of officer administering oath

Notary Public
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.	Total pages this Schedule A1: 6
FILER NAME: Sylvia Garcia	ACCOUNT # (Ethics Commission filers)

Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Fred Zeidman	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77027		
Principal occupation (Optional)		Employer (Optional)	

Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Raba-Kistner PAC	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] San Antonio, TX 78269		
Principal occupation (Optional)		Employer (Optional)	

Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Halliburton Company PAC	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77001-0003		
Principal occupation (Optional)		Employer (Optional)	

Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Craig Shrader	Amount of contribution (\$) \$225.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77024		
Principal occupation (Optional)		Employer (Optional)	

Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Edwin Friedrichs	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77098		
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
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Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
9-28-2001	David Millikan	\$250.00	
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77068			

Principal occupation (Optional)	Employer (Optional)
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Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
9-28-2001	Jeff Ross	\$500.00	
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77040			

Principal occupation (Optional)	Employer (Optional)
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Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
9-28-2001	Gerry Pate	\$500.00	
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77040			

Principal occupation (Optional)	Employer (Optional)
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Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
9-28-2001	Dennis Sander	\$250.00	
Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77063			

Principal occupation (Optional)	Employer (Optional)
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Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
9-28-2001	Ranney McDonough	\$250.00	
Contributor address; City; State; Zip Code [REDACTED] Bellaire, TX 77401			

Principal occupation (Optional)	Employer (Optional)
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**POLITICAL CONTRIBUTIONS
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SCHEDULE A1
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Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Dr. V.N. Vijayvergiya	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77036		

Principal occupation (Optional)	Employer (Optional)
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Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Chris Demopulos	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77018		

Principal occupation (Optional)	Employer (Optional)
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Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC John Swanson	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77095		

Principal occupation (Optional)	Employer (Optional)
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Date 9-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC HAA Better Government Fund	Amount of contribution (\$) \$4,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77099		

Principal occupation (Optional)	Employer (Optional)
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Date 9-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC Elizabeth Ivers	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77077		

Principal occupation (Optional)	Employer (Optional)
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**POLITICAL CONTRIBUTIONS
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SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.	Total pages this Schedule A1: 6
FILER NAME: Sylvia Garcia	ACCOUNT # (Ethics Commission filers)

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
10-2-2001	Annette B. Varela	\$25.00	
Contributor address; City; State; Zip Code			
Houston, TX 77018			
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
10-2-2001	Leticia M. Turner	\$25.00	
Contributor address; City; State; Zip Code			
Houston, TX 77008			
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
10-8-2001	Henry Sauer, Jr.	\$250.00	
Contributor address; City; State; Zip Code			
Houston, TX 77056			
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
10-15-200	Ernest Escobar	\$25.00	
Contributor address; City; State; Zip Code			
Houston, TX 77034			
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor <input type="checkbox"/> out of state PAC	Amount of contribution (\$)	In-kind contribution description (if available)
10-15-200	Charles J. Tamborello	\$250.00	
Contributor address; City; State; Zip Code			
Houston, TX 77025			
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
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SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.	Total pages this Schedule A1: 6
FILER NAME: Sylvia Garcia	ACCOUNT # (Ethics Commission filers)

Date 10-15-200	Full name of contributor <input type="checkbox"/> out of state PAC William Fendley	Amount of contribution (\$) \$150.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Hockley, TX 77447		

Principal occupation (Optional)	Employer (Optional)
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Date 10-15-200	Full name of contributor <input type="checkbox"/> out of state PAC Clinton Wong	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77063		

Principal occupation (Optional)	Employer (Optional)
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Date 10-16-200	Full name of contributor <input type="checkbox"/> out of state PAC Joseph Cibor	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77214		

Principal occupation (Optional)	Employer (Optional)
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Date 10-16-200	Full name of contributor <input type="checkbox"/> out of state PAC Cesar Sylva	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77063		

Principal occupation (Optional)	Employer (Optional)
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Date 10-16-200	Full name of contributor <input type="checkbox"/> out of state PAC Ronald Nielsen	Amount of contribution (\$) \$250.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77057		

Principal occupation (Optional)	Employer (Optional)
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.	Total pages this Schedule A1: 6
FILER NAME: Sylvia Garcia	ACCOUNT # (Ethics Commission filers)

Date 10-18-200	Full name of contributor <input type="checkbox"/> out of state PAC Cheryle R. Johnston	Amount of contribution (\$) \$20.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77002		
Principal occupation (Optional)		Employer (Optional)	

Date 10-18-200	Full name of contributor <input type="checkbox"/> out of state PAC Hollie Stanley, Jr.	Amount of contribution (\$) \$150.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77081		
Principal occupation (Optional)		Employer (Optional)	

Date 10-22-200	Full name of contributor <input type="checkbox"/> out of state PAC Frumencio Reyes, Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77009		
Principal occupation (Optional)		Employer (Optional)	

Date 10-22-200	Full name of contributor <input type="checkbox"/> out of state PAC Janie Reyes	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77009		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES

SCHEDULE F

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

Date	Payee name	Payee address	Amount (\$)
10-22-2001	Tejano Democrats	3715 N. Main Houston, TX 77009	\$175.00

Purpose of expenditure (See instructions regarding type of information required.) Program ad	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date	Payee name	Payee address	Amount (\$)
10-24-2001	Sylvia Garcia	710 Fairbanks Houston, TX 77009	\$515.14

Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for constituents gifts	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date	Payee name	Payee address	Amount (\$)
10-25-2001	Kroger	1938 West Gray Houston, TX 77019	\$54.53

Purpose of expenditure (See instructions regarding type of information required.) Office supplies	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held
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Date	Payee name	Payee address	Amount (\$)
10-25-2001	Kroger	1938 West Gray Houston, TX 77019	\$75.60

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