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

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

See backside for instructions

1 ACCOUNT# 00000000

2 Total pages filed: 33

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST M. J. | MI

NICKNAME | LAST Khan | SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

RECEIVED JUL 15 2004 CITY SECRETARY

Receipt | Amount

Legal | Totals

Date Processed

Date Imaged

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [x] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED

Month Day Year 7 / 01 / 2003 THROUGH Month Day Year 9 / 25 / 2003

6 EXPLANATION OF CORRECTION

See Attached Memoranda for Schedule F and Schedule G.

7 AFFIDAVIT

CHRISTOPHER MAYS
Notary Public, State of Texas
My Commission Expires
July 11, 2007

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, under penalty of perjury, that I did not intend to violate a reporting requirement when I filed the original report.

M J Khan

Signature of Candidate or Officeholder

Sworn to and subscribed before me by M.J. Khan this the 15th day of July, 20 04,

to certify which, witness my hand and seal of office.

Christopher Mays — Signature of officer administering oath

Christopher Mays — Printed name of officer administering oath

Notary Public — Title of officer administering oath

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

(Revised 05/11/2000)

Printed on recycled paper

TEXT ANNOTATION

Information entered by filer as a memo

Schedule A1

Amounts reported as contributions by Smith Barney are interest payments on interest earning campaign f - unds. There is no schedule to accurately report interest payments. Therefore,this explanation was report - ed in the in-kind column of Schedule A.

Information entered by filer as a memo

Schedule F

7-03-2003 - Added $100.00 Returned Check - Smith Barney
7-03-2003 - Added $15.00 Returned Check Fee - Smith Barney
7-07-2003 - Added $15.00 Bank Adj. Fee - Smith Barney
7-16-2003 - Added $18.60 Check Order - Smith Barney
7-27-2003 - Added $250.00 - ICC
8-13-2003 - Added $77.62 Reimbursement - Dionne Roberts
8-13-2003 - Added $250.00 Advertisement - Pakistan Post
8-22-2003 - Added $3.25 Credit Card Fee - AM EX
8-25-2003 - Added $59.70 Credit Card Fee - United Cent. Bank

TEXT ANNOTATION

Information entered by filer as a memo

Schedule	G	7-01-2003 - Added $2,500 Prof. Services - Dionne Roberts 9-04-2003 - Added $450.00 Reimbursement - Dionne Roberts

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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): 00000000

2 Total pages this report: 1/32

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: M. J. | MI

NICKNAME | LAST: Khan | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: P.O. Box 742368

APT / SUITE #; CITY; STATE; ZIP CODE: Houston TX 77274-2368

5 CAMPAIGN TREASURER NAME

TITLE | FIRST: Mark | MI

NICKNAME | LAST: Cole | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 6714 Belmont Street

APT / SUITE #; CITY; STATE; ZIP CODE: Houston TX 77005

7 CAMPAIGN TREASURER PHONE

AREA CODE: (832) PHONE NUMBER: 428-7406 EXTENSION

8 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)

9 PERIOD COVERED

Month Day Year: 07/01/2003 THROUGH Month Day Year: 09/25/2003

10 ELECTION

ELECTION DATE Month Day Year: 11/04/0003

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (If any):

12 OFFICE SOUGHT (If known): Other -- Houston City Council - District F

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

☐ additional pages

GO TO PAGE 2

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	16 ACCOUNT # (Ethics Commission filers)
M.J. Khan	00000000

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	$ 300.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 19,646.75
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	$ 76,851.43
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 18,591.85
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

CHRISTOPHER MAYS
Notary Public, State of Texas
My Commission Expires
July 11, 2007

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said M.J. Khan, this the 15th day of July, 20 04, to certify which, witness my hand and seal of office.

Christopher Mays	Christopher Mays	Notary Public
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

Printed on recycled paper

Revised 09/01/2003

30 Day Report
7/01/03 - 9/25/03

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/06/2003	Terek Hussein & Seham Abdalla [redacted]	100.00	
9 Principal occup[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/2003	Mohammad Abdallah [redacted]	100.00	Chicken for BBQ
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/2003	Nisar & Shaheda Ahmed [redacted]	150.00	
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/02/2003	Sohai Sadruddin & Seema Ahmed [redacted]	500.00	
Principal occu[redacted]	Employer (Optional)		
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)
07/25/2003	Abdul S. Akhter [redacted]	500.00	
Principal occu[redacted]	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Use)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/12/2003	Akbar & Shatida Ali [redacted] State; Zip Code	500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/11/2003	Hashim & Roshan Ali [redacted] Zip Code	500.00	
Principal occ[redacted]	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/11/2003	Nasruddin & Shehnaz Ali [redacted] State; Zip Code	1000.00	
Principal occ[redacted]	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/10/2003	Piyar Ali [redacted] State; Zip Code	500.00	
Principal occ[redacted]	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/12/2003	Piyar Ali [redacted] Zip Code	500.00	
Principal occ[redacted]	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/12/2003	Rafigue A. Ali 6 Contributor address; City; State; Zip Code [redacted]	500.00	
9 Principal occu[redacted]		10 Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/12/2003	Rahim N. Ali Contributor address; City; State; Zip Code [redacted]	500.00	
Principal occu[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/16/2003	Associated Builders & Contractors of Greater Houston PAC Contributor address; City; State; Zip Code [redacted]	500.00	
Principal occu[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/22/2003	Dr. Farouk Barbandi Contributor address; City; State; Zip Code [redacted]	300.00	
Principal occu[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/08/2003	Atty. Barry Allan Brown Contributor address; City; State; Zip Code [redacted]	25.00	
Principal occup[redacted]		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Use) 00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/02/2003	Syed & Ghazala Bukhari [redacted] Zip Code	300.00	
9 Principal occupation (Optional)		10 Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/25/2003	Shabbir & Rashida Dadabhoy [redacted] City; State; Zip Code	100.00	
Principal occ[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/07/200[redacted]	Nada El-Bolbol & Jamal A.R. Dayah [redacted] City; State; Zip Code	1000.00	
Principal oc[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/06/2003	Yassin & Nuha Gamal El-Azz [redacted] State; Zip Code	100.00	
Principal occup[redacted]		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/15/2003	Steven Finkelman [redacted] State; Zip Code	500.00	
Principal occupation [redacted]		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/06/2003	Baldomero Garza [redacted]	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/11/2003	Dr. Richard J. Hausner [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/12/2003	A.F. Hussain [redacted]	10.00	
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/10/2003	Farhina & Mohsin Imtiaz [redacted]	200.00	
Principal occupa[redacted]	Employer (Optional)		
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)
07/25/2003	Mohammad & Zubaida Iqbal [redacted]	500.00	
Principal occupa[redacted]	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/03/2003	Syed & Mary Kadri [redacted] ate; Zip Code	25.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/15/2003	M. J. Khan [redacted] Contributor address; City; State; Zip Code	1000.00	
Principal occu[redacted]	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/23/2003	M. J. Khan [redacted] Contributor address; City; State; Zip Code	2000.00	
Principal occupa[redacted]	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/24/2003	Qamar Sabir & Najma Khan [redacted] Contributor address; City; State; Zip Code	100.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/25/2003	Lala International [redacted] Contributor address; City; State; Zip Code	100.00	
Principal occu[redacted]	Employer (Optional)		

Revised 12/01/1999

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/16/2003	Zahed Lateef [redacted]ty; State; Zip Code	1000.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/09/2003	Chin H. Lee Contributor address: [redacted] City; State; Zip Code	500.00	
Principal occupa[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/21/2003	Dr. Michael P. & Donna M. Macris Contributor address: [redacted] City; State; Zip Code	1000.00	
Principal occup[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/07/2003	Dr. Mobeen & Romana Mazhar Contributor address: [redacted] City; State; Zip Code	500.00	
Principal occup[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/03/2003	Ismail & Parveen Mohammad [redacted] State; Zip Code	100.00	
Principal occupation (Optional)	Employer (Optional)		

Revised 12/01/1999

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/12/2003	Jamshed Momin [redacted] State; Zip Code	500.00	
9 Principal occu[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/12/2003	Sohil Momin [redacted]ty; State; Zip Code	500.00	
Principal occ[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/10/2003	Afzal & Saeeda Oomer [redacted]ty; State; Zip Code	2000.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/08/2003	Atty. John Risley [redacted]ate; Zip Code	25.00	
Principal occup[redacted]	Employer (Optional)		
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)
09/07/2003	Dr. M.A. Sabbahi [redacted]State; Zip Code	100.00	
Principal occu[redacted]	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Item)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/24/2003	Dr. Aziz A. & Nasreen Siddiqi 6 Contributor Address City State; Zip Code [redacted]	100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/24/2003	Mohsin & Tabassum Siddiqui Contributor Address City State; Zip Code [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
07/12/2003	Smith Barney Contributor address City State; Zip Code [redacted]	35.62	Not in-kind contribution: - Interest on campaign fu - nds
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
08/06/2003	Smith Barney Contributor address City State; Zip Code [redacted]	17.49	Not in-kind contribution: - Interest on campaign fu - nds
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
09/12/2003	Smith Barney Contributor address City State; Zip Code [redacted]	8.64	Not in-kind contribution: - Interest on campaign fu - nds
Principal occupation (Optional)	Employer (Optional)		

Revised 12/01/1999

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/06/2003	Jamal & Barbara Zaidan [redacted] State; Zip Code	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 13/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/22/2003	American Express P.O. Box 53773 Phoenix AZ 85072	3.25

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

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 ($)
09/03/2003	American Express P.O. Box 53773 Phoenix AZ 85072	5.95

Purpose of expenditure (See instructions regarding type of information required.)
Credit Card Fee

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 ($)
07/21/2003	Boldface Graphics 5006 Jackwood Houston TX 77096	555.68

Purpose of expenditure (See instructions regarding type of information required.)
Door Hangers

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 ($)
08/24/2003	Boldface Graphics 5006 Jackwood Houston TX 77096	201.35

Purpose of expenditure (See instructions regarding type of information required.)
Business Cards

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 Total pages report: 14/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/04/2003	Boldface Graphics 5006 Jackwood Houston TX 77096	270.63

8 Purpose of expenditure (See instructions regarding type of information required.)
Advertisement Design

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 ($)
08/04/2003	Booker Industries 5415 Maple Avenue Suite 230 Dallas TX 75235	501.81

Purpose of expenditure (See instructions regarding type of information required.)
Select voter lists

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 ($)
08/04/2003	Booker Industries 5415 Maple Avenue Suite 230 Dallas TX 75235	81.19

Purpose of expenditure (See instructions regarding type of information required.)
Select voter files

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 ($)
07/03/2003	Brays Village East Newsletter 16303 Cobble Springs Court Sugar Land TX 77478	180.00

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

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 Total pages report: 15/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/29/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	996.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Neighborhood Outreach

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 ($)
08/03/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	1760.00

Purpose of expenditure (See instructions regarding type of information required.)
Neighborhood Outreach

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 ($)
07/02/2003	Discover Card P.O. Box 52145 Phoenix AZ 85072	10.03

Purpose of expenditure (See instructions regarding type of information required.)
Credit Card Fee

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 ($)
08/31/2003	Five Star Merchant Services P.O. Box 6600 Hagerstown MD 21740	60.12

Purpose of expenditure (See instructions regarding type of information required.)
Credit Card Equipment Rental & Fees

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 Total pages report: 16/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Use) 00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/13/2003	Claudia Gilbert 2550 Joel Wheaten #4603 Houston TX 77082	30.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Hourly campaign services

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 ($)
08/13/2003	Mary Hanlon 1202 Shillington Drive Katy TX 77450	30.00

Purpose of expenditure (See instructions regarding type of information required.)
Hourly campaign services

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 ($)
08/20/2003	Mary Hanlon 1202 Shillington Drive Katy TX 77450	67.00

Purpose of expenditure (See instructions regarding type of information required.)
Hourly campaign services

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 ($)
07/13/2003	Houston Hispanic Chamber of Commerce Policy Committee 2900 Woodridge Drive,Suite 312 Houston TX 77087-2506	175.00

Purpose of expenditure (See instructions regarding type of information required.)
Booth & Tickets for Conference

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 Total pages report: 17/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/27/2003	Indian Cultural Center P.O. Box 572773 Houston TX 77257-2773	250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Booth for Cultural Fair

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 ($)
07/11/2003	International Mailing System 815 Live Oak Houston TX 77003	1686.85

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

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 ($)
08/11/2003	International Mailing System 815 Live Oak Houston TX 77003	1698.64

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

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 ($)
08/22/2003	International Mailing System 815 Live Oak Houston TX 77003	2143.82

Purpose of expenditure (See instructions regarding type of information required.)
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 Total pages report: 18/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/08/2003	International Mailing System 815 Live Oak Houston TX 77003	3071.94

8 Purpose of expenditure (See instructions regarding type of information required.)
File conversion & Postage

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 ($)
07/01/2003	Ernest McGowen 4836 Milwee Street Houston TX 77092	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
08/03/2003	Ernest McGowen 4836 Milwee Street Houston TX 77092	3000.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
08/25/2003	Ernest McGowen 4836 Milwee Street Houston TX 77092	3600.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 Total pages report: 19/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Ners)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/03/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	3277.35

8 Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail

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 ($)
07/03/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	2000.00

Purpose of expenditure (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 ($)
08/04/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	2000.00

Purpose of expenditure (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 ($)
08/14/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	7897.00

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mailers

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 Total pages report: 20/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Use) 00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/25/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	2000.00

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

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 ($)
09/08/2003	Neumann and Company 10004 Bissonnet Box 132 Houston TX 77036	4110.88

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail

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 ($)
08/22/2003	Pakistan News 9522 S. Dairy Ashford Houston TX 77099	250.00

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

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 ($)
08/13/2003	Pakistan Post 13523 Cabrera Lane Houston TX 77083	250.00

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

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 21/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/13/2003	Pakistan Times USA 12375 Bissonnet #56 Houston TX 77099	250.00

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

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 ($)
07/06/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	550.00

Purpose of expenditure (See instructions regarding type of information required.)
Excel program,print cartridges,paper,tem. data entry - clerk & stamps

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 ($)
07/15/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	222.00

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

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 ($)
08/01/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	2500.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 Total pages report: 22/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/13/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	77.62

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

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 ($)
08/25/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	2560.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
07/03/2003	Smith Barney Citigroup 5065 Westheimer Road,Suite 900 East Houston TX 77056	15.00

Purpose of expenditure (See instructions regarding type of information required.)
Returned Check Fee

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 ($)
07/03/2003	Smith Barney Citigroup 5065 Westheimer Road,Suite 900 East Houston TX 77056	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Returned Check

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 Total pages report: 23/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/01/2003	Cheryl Stalinsky 32410 Watersmeet Fulshear TX 77441	1250.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
08/13/2003	Cheryl Stalinsky 32410 Watersmeet Fulshear TX 77441	1300.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
08/25/2003	Cheryl Stalinsky 32410 Watersmeet Fulshear TX 77441	1250.00

Purpose of expenditure (See instructions regarding type of information required.)
Professional Services

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 ($)
07/31/2003	Terry Blackburn Photography 8735 Katy Freeway Houston TX 77024	565.00

Purpose of expenditure (See instructions regarding type of information required.)
Comm. Photography

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 Total pages report: 24/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/07/2003	United Central Bank Houston TX	15.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Open Balance Adjustment Fee

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 ($)
07/16/2003	United Central Bank Houston TX	18.60

Purpose of expenditure (See instructions regarding type of information required.)
Check Order Fee

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 ($)
08/25/2003	United Central Bank Houston TX	59.70

Purpose of expenditure (See instructions regarding type of information required.)
Bank Credit Card Fee

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 ($)
08/04/2003	WC Management 402 W. 16th Street Houston TX 77008	700.00

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

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 25/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
07/11/2003	City of Houston 901 Bagby Houston TX 77002	Finance Reports - Copies	60.75	[X]
09/19/2003	City of Houston 901 Bagby Houston TX 77002	Filing Fee	500.00	[X]
08/21/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	Neighborhood outreach	500.00	[X]
09/05/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	Neighborhood outreach	1750.00	[X]
09/07/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	Joyce Garrett - Hourly campaign services	100.00	[X]

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 26/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
09/09/2003	Coalition Consultants 4836 Milwee Street Houston TX 77092	Neighborhood outreach	3000.00	[X]
08/25/2003	Fiesta Patrias P.O. Box 262871 Houston TX 77207-2871	Parade Permit	200.00	[X]
08/25/2003	Gwennies.Com 3120 Graham Road North Mobile AL 36618	Roll Labels	279.00	[X]
09/02/2003	Gwennies.Com 3120 Graham Road North Mobile AL 36618	4x8's & Bumper Stickers	2358.00	[X]
09/08/2003	Houston Chronicle 801 Texas Avenue Houston TX 77002	Advertisement	1200.00	[X]

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 27/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Use) 00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
07/27/2003	Indian Cultural Center P.O. Box 572773 Houston TX 77257-2773	Booth for Festival	250.00	[X]
09/09/2003	Marie Lee 6435 S. Briar Bayou Houston TX 77072	Hourly campaign services	192.00	[X]
09/24/2003	One Net 4370 Hwy 6 N.,Suite 136 Houston TX 77064	Phone Bank	406.00	[X]
07/19/2003	PAGH 9644 S. Kirkwood #A-3 Houston TX 77099	Booth for Festival	200.00	[X]
09/07/2003	Linda Pleuss 7235 Longvine Drive Houston TX 77072	Hourly campaign services	180.00	[X]

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 28/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission Ben) 00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
09/21/2003	Hoang Anh Richards 10603 Sassay Drive Houston TX 77099	Translation services	60.00	[X]
07/01/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	Professional Services	2500.00	[X]
09/03/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	Early Voting BBQ	450.00	[X]
09/04/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	Reimbursement for food & supplies	450.00	[X]
09/23/2003	Dionne Roberts 2727 Elmside Drive,Suite 130 Houston TX 77042	Professional Services	1250.00	[X]

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 29/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
08/27/2003	Sprint Digital Print 10100 Clay Road Suite C Houston TX 77080	Invitations	243.00	[X]
09/15/2003	Sprint Digital Print 10100 Clay Road Suite C Houston TX 77080	Yard Signs	2868.63	[X]
09/16/2003	Sprint Digital Print 10100 Clay Road Suite C Houston TX 77080	T-Shirts	645.44	[X]
09/16/2003	Sprint Digital Print 10100 Clay Road Suite C Houston TX 77080	Invitations	140.00	[X]
09/15/2003	TNT Houston Radio 7111 Harwin Drive,Suite 270 Houston TX 77036	Radio Spot	250.00	[X]

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 30/32

2 FILER NAME
M. J. Khan

3 ACCOUNT # (Ethics Commission files)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	8 Amount ($)
07/05/2003	U.S. Postal Service 2909 Rogerdale Houston TX 77042	96.20
	7 Purpose of expenditure (See instructions regarding type of information required.) Stamps	[X] Reimbursement from political contributions intended

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
09/23/2003	U.S. Postal Service Demoss Station Houston TX 77074-9998	125.00
	Purpose of expenditure (See instructions regarding type of information required.) Stamps	[X] Reimbursement from political contributions intended