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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission filers): 4

2 Total pages this report: 1/24

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: | FIRST: Antoinette B | MI:
NICKNAME: Toni | LAST: Lawrence | SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 7047 Bent Branch Dr | APT / SUITE #: | CITY: | STATE: | ZIP CODE:
Houston TX 77088

5 CAMPAIGN TREASURER NAME

TITLE: Mr. | FIRST: George D | MI:
NICKNAME: | LAST: Franklow | SUFFIX: Jr.

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 2618 Sutton Ct | APT / SUITE #: | CITY: | STATE: | ZIP CODE:
Houston TX 77027

7 CAMPAIGN TREASURER PHONE

AREA CODE: (713) | PHONE NUMBER: 552-0838 | 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: 01/01/2004 THROUGH Month Day Year: 06/30/2004

10 ELECTION

ELECTION DATE: Month Day Year

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Other – Houston City Council

12 OFFICE SOUGHT (if known):

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

OFFICE USE ONLY

Date Received: RECEIVED JUL 15 2004 CITY SECRETARY

Date Hand Delivered or Date Postmarked:

Receipt #: | Amount:

Date Processed:

Date Imaged:

GO TO PAGE 2

(Effective 12/16/1999)

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: Antoinette B Lawrence

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 24125.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4. **TOTAL POLITICAL EXPENDITURES**	$ 8150.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 68826.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

19 AFFIDAVIT

LAURAN HELMS NOTARY PUBLIC STATE OF TEXAS EXPIRES 02-27-2008

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.

Antoinette (Toni) Lawrence
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Antoinette (Toni) Lawrence, this the 15th day of July, 20 04, to certify which, witness my hand and seal of office.

Lauran Helms — Signature of officer administering oath
Lauran Helms — Printed name of officer administering oath
Notary Public — Title of officer administering oath

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: 3/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/12/2004	Deborah J Anders [redacted]	100.00	
9 Principal occupa[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/23/2004	Daniel G or Beth Bellow [redacted] Zip Code	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	E.L. Boswell [redacted] State; Zip Code	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	Mark L Boyer [redacted] 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)
01/20/2004	Bracewell & Patterson [redacted] State; Zip Code	1000.00	
Principal occu[redacted]	Employer (Optional)		

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: 4/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/22/2004	Gerald M Brady [redacted] 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)
01/19/2004	Brian Brand [redacted] State; Zip Code	500.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/05/2004	Peter Hoyt Brown [redacted] ity; State; Zip Code	150.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
03/01/2004	Rudolph H Bruhns [redacted] State; Zip Code	1000.00	
Principal occupation (Optional)	Employer (Optional)		

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	CDMPAC [redacted] ity; State; Zip Code	250.00	
Principal occupation (Optional)	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: 5/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/19/2004	Paul Carter [redacted] State; Zip Code	500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/20/2004	Joseph M or Niki Cibor Contributor address; City; State; Zip Code [redacted]	250.00	
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	Harold Cobb [redacted] State; Zip Code	250.00	
Principal occupa[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
02/12/2004	Garnet F Coleman [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)
01/20/2004	Rita S Cook [redacted] ty; State; Zip Code	100.00	
Principal occupa[redacted]	Employer (Optional)		

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
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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/16/2004	Michael D Copland [redacted]	50.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	James D or Shirley M Dannenbaum [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/13/2004	Jack Drake [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/04/2004	Steven J Finkelman [redacted]	500.00	
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)
01/05/2004	Edwin C Friedrichs [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

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1 Total pages this report: 7/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

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)
01/16/2004	Fulbright & Jaworski	[redacted]	500.00	

9 Principal occupation (Optional) [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)
01/03/2004	Ramesh Gunda	[redacted]	250.00	

Principal occupation (Optional) [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)
01/13/2004	Jeff Haas	[redacted]	100.00	

Principal occupation (Optional) [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)
01/27/2004	Patricia F or Eric T Harless	[redacted]	500.00	

Principal occupation (Optional) [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)
01/10/2004	Edd C or Nina J Hendee	[redacted]	100.00	

Principal occupation (Optional) [redacted]
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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1 Total pages this report: 8/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/14/2004	Lawrence W Hill [redacted]	500.00	
9 Principal occup[redacted]		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/20/2004	Interloop Auto Storage [redacted] City; State; Zip Code	150.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	James R Jard [redacted] Contributor address; City; State; Zip Code	1000.00	
Principal occup[redacted]		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/05/2004	Mary Alice Justice [redacted] Contributor address; City; 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)
01/12/2004	A. L. Keller [redacted] Contributor address; City; State; Zip Code	100.00	
Principal occu[redacted]		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

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)
01/12/2004	Lawrence W or Susan C Kellner [redacted]	1000.00	
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)
01/22/2004	Nathelyne Kennedy [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)
01/20/2004	Richard or Donna King [redacted]	100.00	
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)
01/13/2004	Tom Kvinta [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)
01/22/2004	Keith Lawyer [redacted]	100.00	
Principal occupation (Optional)	Employer (Optional)		

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: 10/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/14/2004	Linda or Jeffrey Lehman [redacted]	100.00	
9 Principal occup[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/09/2004	Robert C or Grace P Lin [redacted] State; Zip Code	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	Sophie Mafrige [redacted] State; Zip Code	100.00	
Principal occup[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
01/27/2004	Jack Miller [redacted] City; State; Zip Code	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)
01/05/2004	Etan Mirwis [redacted] State; Zip Code	500.00	
Principal occupation (Optional)	Employer (Optional)		

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: 11/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address: City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/09/2004	Michael D or Mary Kay Morton [redacted]	100.00	
9 Principal occupa[redacted]		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/16/2004	Walter Negley [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address: City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	Alice O'Neill [redacted]	100.00	
Principal occu[redacted]		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address: City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/19/2004	PHCG Investments [redacted]	1000.00	
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)
01/16/2004	Imogen Papadoulos [redacted]	250.00	
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: 12/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission files)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
01/12/2004	Charles Rash [redacted]	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/12/2004	Reliant Resources,Inc PAC [redacted]	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/06/2004	Harry Rhodes [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/19/2004	Chris Richardson [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)
01/18/2004	Ronald N Hayes & Associates PC [redacted]	100.00	
Principal occupation (Optional)	Employer (Optional)		

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: 13/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission files)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/16/2004	Royce Builders [redacted]	1000.00	
9 Principal occu[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/07/2004	Dennis W Sander [redacted]	100.00	
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/01/2004	Sharene L or Michael W Scully [redacted]	1000.00	
Principal occup[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/22/2004	S Louis or Deborah K Smith [redacted]	250.00	
Principal occu[redacted]	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/03/2004	Melvin G or Gail Spinks [redacted]	500.00	
Principal occupation (Optional)	Employer (Optional)		

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: 14/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/09/2004	Jon H Strange [redacted]	500.00	
9 Principal oc[redacted]	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/15/2004	TREPAC/TX Asso of Realtors [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 ($)	In-kind contribution description (if applicable)
01/13/2004	Richard or Mary Ellen Tange [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/14/2004	Jack J Turk [redacted]	25.00	
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)
01/20/2004	Kenneth W Ulmer [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		

Revised 12/01/1999

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
03/01/2004	Uptown Houston PAC 6 Contributor address; City; State; Zip Code [redacted]	500.00	

9 Principal occupation (Optional) [redacted]
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
02/23/2004	Edmond D Wulfe [redacted] ty; State; Zip Code [redacted]	500.00	

Principal occupation (Optional) [redacted]
Employer (Optional)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 16/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
05/12/2004	Birdies for Charity (Spring Branch Family Developement Center 8575 Pitner Houston TX 77080	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

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 ($)
02/27/2004	Blakemore & Associates 3405 Edloe St Ste 360 Houston TX 77027	4890.14

Purpose of expenditure (See instructions regarding type of information required.)
Fundraiser:Fee-3000Fac-1019.87Design-159.67Spo - nsorship-300Courier-6.68Print-252.28Fax-151.64

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 ($)
05/04/2004	Martha Galvan 1123 Gardendale Houston TX 77018	75.00

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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 ($)
02/27/2004	Barbara Harville P.O. Box 1562 Houston TX 77251-1562	38.90

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Office Supplies

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: 17/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
06/07/2004	Barbara Harville P.O. Box 1562 Houston TX 77251-1562	33.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Staff Appreciation

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 ($)
06/20/2004	Imperial Guard Alumnie 1900 W 34th St Houston TX 77018	30.00

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

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 ($)
06/20/2004	Kaye Marvins Photography,Inc 4401 Montrose Blvd Houston TX 77006	106.09

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

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 ($)
06/20/2004	Leadership Houston 3015 Richmond Ave Ste 290 Houston TX 77098	50.00

Purpose of expenditure (See instructions regarding type of information required.)
Officeholder:Misc-Dues

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: 18/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/26/2004	Multiple Sclerosis 6655 Travis St Ste 780 Houston TX 77030	25.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

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 ($)
04/13/2004	Oaks Dad's Club 1618 Candlelight Houston TX 77018	150.00

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

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 ($)
05/14/2004	Old Spring Branch Civic Assoc P.O. Box 55172 Houston TX 77255-5172	50.00

Purpose of expenditure (See instructions regarding type of information required.)
Public Relations:Sponsorship

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 ($)
06/07/2004	Photos Unlimited 17220 Canby Rd Hockley TX 77447	40.00

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

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: 19/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/16/2004	US Postmaster Oak Forest Branch Houston TX 77018-9998	75.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Rental of Post Office Box

9 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 MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 20/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers) 4

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
06/15/2004	Art & Frame Etc. 2619 West T.C. Jester Houston TX 77018	Officeholder:Office Supplies	73.77	[X]
03/19/2004	Artista Restaurant 800 Bagby Houston TX 77002	Public Relations:Meals	34.00	[X]
02/10/2004	Cingular Wireless P.O. Box 27717 Houston TX 77227	Officeholder:Cell Phone	243.51	[X]
03/16/2004	Crime Stoppers 3001 Main St #2 Houston TX 77002	Public Relations:Sponsorship	1000.00	[X]
03/19/2004	Greater Houston Pachyderm P.O. Box 22531 Houston TX 77227	Public Relations:Meals	10.00	[X]

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 21/24

2 FILER NAME: Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers): 4

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
06/20/2004	Greater Houston Pachyderm P.O. Box 22531 Houston TX 77227	Officeholder:Misc- Dues	40.00	[X]
04/05/2004	Hobby Lobby 13470 NW Freeway Houston TX 77040	Officeholder:Office Supplies	25.98	[X]
01/06/2004	Homestyle Buffet 8203 Long Point Houston TX 77055	Officeholder:Staff Appreciation	283.36	[X]
01/05/2004	Houston Livestock Show and Rodeo P.O. Box 20070 Houston TX 77225-0070	Print Advertising	50.00	[X]
03/18/2004	Inwood Forest Country Club 7603 Antoine Dr Houston TX 77008	Public Relations:Meals	22.74	[X]

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 22/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission Use)
4

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
03/18/2004	James Coney Island 11111 Katy Freeway Ste 700 Houston TX 77079	Officeholder:Staff Appreciation	10.45	X
02/25/2004	Leadership Houston 3015 Richmond Ave Ste 290 Houston TX 77098	Public Relations:Meals	35.00	X
01/26/2004	Mandarin Hunan 777 Walker St #1601 Houston TX 77002	Officeholder:Staff Appreciation	18.16	X
02/27/2004	Marriott 5150 Westheimer Houston TX 77056	Officeholder:Travel	7.00	X
02/19/2004	Museum District Business Alliance 2615 Waugh Dr Houston TX 77006	Public Relations:Meals	20.00	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: 23/24

2 FILER NAME
Antoinette B Lawrence

3 ACCOUNT # (Ethics Commission filers)
4

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
06/16/2004	Randall's 5664 West 34th Houston TX 77092	Officeholder:Staff Appreciation	26.99	[X]
03/16/2004	Star Furniture P.O. Box 219169 Houston TX 77218-9169	Officeholder: Office Furniture	487.11	[X]
01/01/2004	Tejas Lighting Company 132 E Main St Fredericksburg TX 78624	Officeholder:Office Supplies	97.37	[X]
01/04/2004	Tuesday Morning 2559 Gessner Houston TX 77080	Officeholder:Misc-Cards	13.17	[X]
01/06/2004	Wal-Mart Longpoint Houston TX 77055	Officeholder:Staff Appreciation	26.17	[X]