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): 9

2 Total pages this report: 1/25

OFFICE USE ONLY
Date Received: RECEIVED DEC 01 2003 CITY SECRETARY
Date Hand-delivered or Date Postmarked: Messenger
Receipt # | Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
TITLE | FIRST: Terry | MI
NICKNAME | LAST: McConn | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS
☐ Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3405 Edloe St
Ste 380
Houston TX 77027

5 CAMPAIGN TREASURER NAME
TITLE | FIRST: Keith | MI
NICKNAME | LAST: Thayer | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3405 Edloe St
Ste 380
Houston TX 77027

7 CAMPAIGN TREASURER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(713) 526-3399

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: 10/26/2003 THROUGH Month Day Year: 11/26/2003

10 ELECTION
ELECTION DATE Month Day Year: 12/06/2003
ELECTION TYPE: ☐ Primary ☒ Runoff ☐ General ☐ Special

11 OFFICE
OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): Other -- Houston City Council- - Dist 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

(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: Terry McConn

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)	$ 42500.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 44814.19
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 35379.36
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 25000.00

19 AFFIDAVIT

ALLEN E. BLAKEMORE NOTARY PUBLIC STATE OF TEXAS EXPIRES 03-05-2007

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said TERRY MCCONN, this the 2ND day of DECEMBER, 20 03, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
	ALLEN E. BLAKEMORE	NOTARY

Revised 09/01/2003

Printed on recycled paper

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: 3/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/14/2003	Eleni Antonellos [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/17/2003	M.D. Bailey [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 ($)	In-kind contribution description (if applicable)
10/28/2003	Bruce or Judy Baker [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/14/2003	Robert S Begien Jr. [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)
10/27/2003	Ronald L Bernell [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: 4/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/19/2003	Edward L Boswell [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Gerald M Brady [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 ($)	In-kind contribution description (if applicable)
10/27/2003	Frank E or Glynis A Brooks Brooks [redacted]	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Rudolph H Bruhns [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)
10/27/2003	Don A Buckalew,Jr [redacted]	200.00	
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: 5/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/19/2003	CDM PAC [redacted]	500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/17/2003	Jodie B or John C Carrabba III [redacted]	750.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/10/2003	Darryl B Carter [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Rita S Cook [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)
10/29/2003	Robert C or Jackie F Cox [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)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/26/2003	Gary J or Milissa G Deurance [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)
11/12/2003	Ted or Lorraine Dinerstein [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)
11/11/2003	Casey or Julie B Doherty [redacted]	50.00	

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)
11/12/2003	Ty J Donahoe [redacted]	100.00	

Principal occupation (Optional)
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)
10/28/2003	C.K. or H. Mills Duncan III [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: 7/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/18/2003	C.K. or H. Mills Duncan III [redacted]	100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/12/2003	Maggie or Dale Farrar [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 ($)	In-kind contribution description (if applicable)
11/19/2003	Paula M Farrell [redacted]	100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	C.M. Garver [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)
11/19/2003	Frank J or Mignonne Gaskey [redacted]	200.00	
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: 8/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/26/2003	Ramsay H Gillman [redacted]	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/28/2003	H Lee Godfrey [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 ($)	In-kind contribution description (if applicable)
11/17/2003	Harriett S Goodman [redacted]	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	James T or Maureen Hackett [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)
10/29/2003	Michael L or Gracy M Hall [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)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

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)
11/11/2003	Lawrence W or Suzanne M Hill [redacted]	500.00	

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)
11/13/2003	Home-PAC [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)
11/14/2003	Hou-Con PAC [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)
11/07/2003	Houston Fire Fighters Political Action Fund [redacted]	4000.00	

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)
10/29/2003	Houston Police Patrolmen's Union [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: 10/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/31/2003	Houston Police Retired Officers Assoc PAC [redacted]	500.00	

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)
11/06/2003	Houston Police Retired Officers Assoc 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)
11/14/2003	Joe or Jonell Hutchins [redacted]	200.00	

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)
10/28/2003	IEC Of Houston PAC [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)
10/29/2003	James J Janke [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: 11/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

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)
11/20/2003	Sidney A or Doris L Johnston [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)
10/29/2003	David J Keilson [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)
11/10/2003	A.L. Keller [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)
11/19/2003	Richard or Donna King [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)
11/19/2003	Hemachandra Prasad Kolluru [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: 12/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/14/2003	William D Kvinta [redacted]	250.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/11/2003	Keith Lawyer [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 ($)	In-kind contribution description (if applicable)
11/06/2003	Linebarger Goggan Blair & Sampson,LLP [redacted]	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/16/2003	Amelia A Lyons [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)
10/31/2003	Harry Mach [redacted]	200.00	
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)

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1 Total pages this report: 13/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/19/2003	Steven F or Anne D Malone [redacted]	150.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Theresa E McAfee [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 ($)	In-kind contribution description (if applicable)
11/19/2003	Cathy or James J McConn Jr. [redacted]	150.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/27/2003	David L or Lisa H Mossy [redacted]	150.00	
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)
10/27/2003	Wiley L or Jane P Mossy [redacted]	250.00	
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: 14/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/17/2003	Gary or Karen Novak [redacted]	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Outdoor 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 ($)	In-kind contribution description (if applicable)
11/17/2003	Brian S Parsley,M.D. [redacted]	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/11/2003	Bob or Doylene Perry [redacted]	5000.00	
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)
11/11/2003	Bob Perry [redacted]	5000.00	
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: 15/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/10/2003	Michael Philips [redacted] Houston [redacted]	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/01/2003	Cathy V or Jack Y Pool [redacted] Hou[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 ($)	In-kind contribution description (if applicable)
11/13/2003	Charles or Jeanette Rash [redacted] Houst[redacted]	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/19/2003	Charles or Jeanette Rash [redacted]dress; Houst[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)
11/19/2003	Roman F or Sally S Reed [redacted] Bellaire [redacted]	200.00	
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: 16/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

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)
11/19/2003	Robert T Russ Jr. [redacted] Houston [redacted]	500.00	

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)
11/19/2003	SPI Guide Service [redacted] Houston [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)
11/13/2003	J.R. Schoelpple [redacted] Houston [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)
11/19/2003	Richard R Scott [redacted] Houston T[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)
11/19/2003	Dudley Smith [redacted] Houston [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)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/29/2003	W. C. Smith [redacted] Houston [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)
10/28/2003	Fernando J Somoza [redacted] Houston TX [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)
11/11/2003	TX Friends of Time Warner Cable [redacted] Houston T[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)
11/06/2003	Texas Coalition for Good Government [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)
11/19/2003	Texas Investigative Network [redacted] Houst[redacted]	100.00	

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: 18/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/19/2003	Joe Ting [redacted]	200.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/29/2003	Walter B or Faith Wainwright Jr. [redacted]	200.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/12/2003	J.L. Waltmon [redacted]	250.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/12/2003	J.L. Waltmon [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)
10/28/2003	Westchase PAC [redacted]	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: 19/25

2 FILER NAME: Terry McConn

3 ACCOUNT # (Ethics Commission filers): 9

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address: City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/27/2003	Stacey Gillman Wimbish [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)
10/27/2003	T.A. Winkelman [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)
11/19/2003	Terry W Yates [redacted]	250.00	

Principal occupation (Optional)

Employer (Optional)

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 20/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/29/2003	A&E Products,Inc P.O. Box 27286 Houston TX 77227	1206.39

8 Purpose of expenditure (See instructions regarding type of information required.)
Signs:Yard Signs & 4x8

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 ($)
11/24/2003	A&E Products,Inc P.O. Box 27286 Houston TX 77227	2753.51

Purpose of expenditure (See instructions regarding type of information required.)
Signs:Yard Signs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/14/2003	ABS Fax Technologies,Inc 2401 Fountainview Ste 818 Houston TX 77057	229.84

Purpose of expenditure (See instructions regarding type of information required.)
Fundraising: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 ($)
10/29/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	1000.00

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

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: 21/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/14/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	340.76

8 Purpose of expenditure (See instructions regarding type of information required.)
Admin:Courier-40.10 Fax-50.66 Misc-Research-250

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 ($)
11/25/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	2783.15

Purpose of expenditure (See instructions regarding type of information required.)
Consult-2500 Direct Mail:87.64 Admin:Courier:46.46 - Fundraising:Facilities-149.05

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 ($)
11/25/2003	Blakemore & Associates 3405 Edloe St Ste 380 Houston TX 77027	1550.00

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 ($)
11/25/2003	Conservative Republicans of Harris County 3405 Edloe St Ste 380 Houston TX 77027	5000.00

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

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: 22/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/10/2003	Carolyn Lacye 9330 Colt Canyon Lane Houston TX 77089	1358.29

8 Purpose of expenditure (See instructions regarding type of information required.)
Consult-1000 Phone-358.29

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 ($)
11/06/2003	Minuteman Press 50 Briar Hollow Lane Ste 180 West Houston TX 77027	638.90

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact-Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	1773.14

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/30/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	1861.90

Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact - #3

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: 23/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/24/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	1724.42

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

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 ($)
11/25/2003	SWP Printers 1055 Conrad Sauer Houston TX 77043	3860.20

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

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 ($)
11/14/2003	T. MacDesigns 2723 Werlein St Housotn TX 77005	580.22

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/29/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	3247.50

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

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: 24/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/30/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	54.13

8 Purpose of expenditure (See instructions regarding type of information required.)
Direct Mail:Voter Contact - Poll Cards

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 ($)
11/24/2003	Tribe Design 5555 Morningside Dr Ste 202 Houston TX 77005	4005.25

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
10/27/2003	WC Management 402 W 16th St Houston TX 77008	2733.60

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

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 ($)
11/03/2003	WC Management 402 W 16th St Houston TX 77008	473.52

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

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: 25/25

2 FILER NAME
Terry McConn

3 ACCOUNT # (Ethics Commission filers)
9

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/10/2003	WC Management 402 W 16th St Houston TX 77008	295.63

8 Purpose of expenditure (See instructions regarding type of information required.)
Fundraising:Invitations

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 ($)
11/19/2003	WC Management 402 W 16th St Houston TX 77008	2350.37

Purpose of expenditure (See instructions regarding type of information required.)
Fundraising:Invitations

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 ($)
11/21/2003	WC Management 402 W 16th St Houston TX 77008	2388.74

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

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 ($)
11/24/2003	WC Management 402 W 16th St Houston TX 77008	2604.73

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

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