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): N/A

2 Total pages filed: 20

OFFICE USE ONLY

Date Received: RECEIVED JAN 15 2002 CITY SECRETARY

Date Hand-delivered or Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
TITLE: Ms. FIRST: CLAUDIA MI: F.
NICKNAME: – LAST: WILLIAMSON SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS
☑ Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
5618 TURFWOOD
Houston. TEXAS 77088

5 CAMPAIGN TREASURER NAME
TITLE: Ms. FIRST: CELINA MI: GARZA
NICKNAME: LAST: RIDGE SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
12103 Gladewick
Houston. TEXAS 77077

7 CAMPAIGN TREASURER PHONE
AREA CODE / PHONE NUMBER / EXTENSION
(281) 679-0154

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: 11/22/01 THROUGH Month Day Year: 1/15/02

10 ELECTION
ELECTION DATE Month Day Year: 12/01/01
ELECTION TYPE: ☐ Primary ☒ Runoff ☐ General ☐ Special

11 OFFICE
OFFICE HELD (if any):
12 OFFICE SOUGHT (if known): Houston City Council At-Large Pos. 4

13 NOTICE OF 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: N/A
Address / PO Box; Apt. / Suite #; City; State; Zip Code
☐ additional pages

GO TO PAGE 2

Printed on recycled paper

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

14 C/OH NAME: CLAUDIA WILLIAMSON

15 ACCOUNT # (Ethics Commission filers): N/A

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME: N/A

COMMITTEE ADDRESS:

COMMITTEE CAMPAIGN TREASURER NAME:

COMMITTEE CAMPAIGN TREASURER ADDRESS:

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 35.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 17,395.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 25.00
	4. **TOTAL POLITICAL EXPENDITURES**	$ 43,770.43
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ — 0 —

19 AFFIDAVIT

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

KARLA Y DELUCA
NOTARY PUBLIC
State of Texas
Comm. Exp. 06-11-2002

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 15 day of JANUARY, 20 02, 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

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 1 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/20/01	3D/I PAC,	$250.00	
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77027		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [X] out-of-state PAC (ID# C00011114)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/20/01	American Federation of State, County, and Municipal Employees-AFL-CIO,	$2,000.00	
	6 Contributor address: City; State; Zip Code [redacted]Washington,DC 20036		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
12/13/01	Arnold, Paula S.,	$800.00	
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77019		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/17/01	Bell, Deborah M.,	$25.00	
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77055-7011		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/18/01	Berthelsen, Alice May,	$100.00	
	6 Contributor address: City; State; Zip Code 14[redacted]Houston,TX 77004		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/30/01	Blazek, Jody,	$100.00	
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77006		
	9 Principal occupation (Optional) 10 Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 2 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/26/01	Brown, Peter Hoyt,	$500.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77098		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/28/01	Carter, Darryl B.,	$500.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 12/18/10		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/26/01	Clarke, Linda G.,	$625.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77002		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
12/1/01	Cooley, Elaine Sullivan,	$250.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77079		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/28/01	Curtis, Sharon K.,	$500.00	
	6 Contributor address: City; State; Zip Code [redacted] Brenham,TX 77833		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/25/01	Elmore, Susan Workman,	$250.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77019		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/20/01	Garver, C.M.,	$500.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77023		

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 3 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Hagstette, Guy L.,	7 Amount of Contribution ($) $300.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77002		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/27/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Heldendels, Fred W. IV,	7 Amount of Contribution ($) $1,000.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Austin,TX 78746		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/27/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Henley, Barbara M.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77027		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/27/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Hermes Reed Architects PAC,	7 Amount of Contribution ($) $250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77063		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/24/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Hershey, Terese T.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77024		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/20/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Holleyhead, Ronald E.,	7 Amount of Contribution ($) $250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77077		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/19/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Horne, Howard W.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 4 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77056		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/20/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Housotn Associated General Contractors PAC,	7 Amount of Contribution ($) $250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77092		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/29/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) IBEW Local Union 716 PAC Fund,	7 Amount of Contribution ($) $500.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted],Houston,TX 77008		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/19/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Kensinger, Stuart R.,	7 Amount of Contribution ($) $250.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted],Houston,TX 77056		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 12/1/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Kidd, Elizabeth W.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77019		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Kilian, Kathleen D.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77098		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Knull, Yolanda C.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted]Houston,TX 77024-5612		
	9 Principal occupation (Optional) 10 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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 5 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/27/01	Lawing, Douglas L.,	$150.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77002		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/27/01	Lewis, Carol A.,	$75.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77004		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/26/01	Linton, Melaney A.,	$150.00	
	6 Contributor address: City; State; Zip Code [redacted] Houston,TX 77006		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/26/01	Martinez, David F.,	$1,000.00	
	6 Contributor address: City; State; Zip Code [redacted],Houston,TX 77060		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/26/01	McNair, Robert C.,	$1,000.00	
	6 Contributor address: City; State; Zip Code [redacted],Houston,TX 77002		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/19/01	Miller, Kendall A.,	$250.00	
	6 Contributor address: City; State; Zip Code [redacted],Houston,TX 77056		
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/16/01	Mitchell, George P.,	$250.00	
	6 Contributor address: City; State; Zip Code [redacted] The Woodlands,TX 77387		

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC,SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 6 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) / 6 Contributor address: City; State; Zip Code / 9 Principal occupation (Optional) / 10 Employer (Optional)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
11/21/01	Morris Architects Civic Action Fund, [redacted] Houston,TX 77098	$500.00	
11/11/01	Oshman, Marilyn, [redacted], Houston, TX 77019	$500.00	
11/19/01	Othon, Sofia, [redacted] Houston,TX 77042	$500.00	
11/26/01	Rash, Jeanette H,, [redacted] Houston,TX 77020	$400.00	
11/26/01	Rea-Gaubert, Vesta, [redacted] pring,TX 77379	$200.00	
	Robinson, Judson III, [redacted] Houston, TX 77253	$500.00	Poll Workers
11/27/01	Ross De Geurin, Gayle,	$50.00	

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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 7 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

	6 Contributor address: City; State; Zip Code [redacted], Houston, TX 77019 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/30/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Saunders, Yancy L.,	7 Amount of Contribution ($) $485.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston, TX 77056 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Sheet Metal Workers Local Union #54,	7 Amount of Contribution ($) $400.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston, TX 77292-0636 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Tetreault, Paul R.,	7 Amount of Contribution ($) $100.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston, TX 77009 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/28/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Thompson-Draper, Cheryl Lynn,	7 Amount of Contribution ($) $1,000.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston, TX 77042 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/26/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Wilson, Wade H.,	7 Amount of Contribution ($) $25.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted], Houston, TX 77270 9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date 11/19/01	5 Full Name of contributor [ ] out-of-state PAC (ID#_____) Wisniewski, Paticia M.,	7 Amount of Contribution ($) $25.00	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code [redacted] Houston, TX 77090 9 Principal occupation (Optional) 10 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 A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

1 Total pages this Schedule A1: 8 of 8

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers) n/a

4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code	$17,360.00	
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code	$17,360.00	
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code	$17,360.00	
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code	$17,360.00	
	9 Principal occupation (Optional) 10 Employer (Optional)		
4 Date	5 Full Name of contributor [ ] out-of-state PAC (ID#_____)	7 Amount of Contribution ($)	8 In-kind contribution description (if applicable)
	6 Contributor address: City; State; Zip Code	$17,360.00	
	9 Principal occupation (Optional) 10 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 Schedule F: 1 of 9

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/24	James Rodriguez 7814 Moline Houston, TX 77087	300.00

8 Purpose of payment (See instructions regarding type of information required.): Early Vote GOTV

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	Tony Williams 12137 Poulson Houston, TX 77031	180.00

Purpose of payment (See instructions regarding type of information required.): Early vote GOTV

-- 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 ($)
4/26	Tony Williams 12137 Poulson Houston, TX 77031	500.00

Purpose of payment (See instructions regarding type of information required.): contract labor

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/26	South Belt Leader 11555 Beamer Houston, TX 77089	150.00

Purpose of payment (See instructions regarding type of information required.): newspaper ad

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 2 of 9

2 FILER NAME: CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/26	HCN 1129 Kingwood Dr. Humble, TX 77339	349.02

8 Purpose of payment (See instructions regarding type of information required.)	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held
newspaper ad	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/27	Shannon Langrand 1401 Bonnie Brae Houston, TX 77006	1,500.00

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held
Contract labor	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/28	Campaign Strategies 515 Post Oak Blvd #120 Houston, TX 77027	14,958.23

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held
reimbursement - TV buy	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/29	Campaign Strategies 515 Post Oak Blvd #120 Houston, TX 77027	3,015.00

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held
reimbursement - radio buy	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 9 of

2 FILER NAME: CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/30	Copy.com 1201 Westheimer Houston, TX 77006	687.66

8 Purpose of payment (See instructions regarding type of information required.)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name / Office sought / Office held
Printing	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/30	Black Slate, Inc 5317 Martin Luther King Blvd. Houston, TX 77021	500.00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/1	James Rodriguez 7814 Moline Houston, TX 77087	1,420.00

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
12/1	Shannon Langrand 1401 Bonnie Brae Houston, TX 77006	1,820.00

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 of Schedule F: 9 of 9

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/1	Tony Williams 12137 Poulson Houston, TX 77031	6,855.00

8 Purpose of payment (See instructions regarding type of information required.): Election Day GOTV

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 ($)
12/1	Sarah Pitre 1912 Marshall Houston, TX 77098	455.00

Purpose of payment (See instructions regarding type of information required.): Election Day GOTV

-- 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 ($)
12/6	Campaign Strategies 525 Post Oak Blvd #120 Houston, TX 77027	199.31

Purpose of payment (See instructions regarding type of information required.): reimbursement - radio ad production

-- 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 ($)
12/6	Copy.com 1201 Westheimer Houston, TX 77006	27.06

Purpose of payment (See instructions regarding type of information required.): printing

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 9 of 9

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/6	Campaign Strategies 515 Post Oak Blvd #120 Houston, TX 77027	2,047.11

8 Purpose of payment (See instructions regarding type of information required.): reimbursement-automated calls

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 ($)
12/6	Campaign Strategies 515 Post Oak Blvd. #120 Houston, TX 77027	811.00

Purpose of payment (See instructions regarding type of information required.): reimbursement -cable TV buy

-- 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 ($)
12/6	Campaign Strategies 515 Post Oak Blvd #120 Houston, TX 77027	730.69

Purpose of payment (See instructions regarding type of information required.): reimbursement - 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 ($)
12/6	Shannon Langrand 1401 Bonnie Brae Houston, TX 77027	1,863.24

Purpose of payment (See instructions regarding type of information required.): reimbursement - campaign expenses

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 6 of 9

2 FILER NAME CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/7	Kathy Griffin 1925 Lexington Houston, TX 77098	500.00

8 Purpose of payment (See instructions regarding type of information required.): election night party

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 ($)

Purpose of payment (See instructions regarding type of information required.)

** 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 ($)
12/12	Dinosaur Plastics 4727 Gulf Fwy, Houston, TX 77023	182.99

Purpose of payment (See instructions regarding type of information required.): balloons

** 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 ($)
12/12	Sarah Pitre 1912 Marshall Houston, TX 77098	500.00

Purpose of payment (See instructions regarding type of information required.): contract labor

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 7 of 9

2 FILER NAME: CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/12	Sarah Pitre 1912 Marshall Houston, TX 77098	589.62

8 Purpose of payment (See instructions regarding type of information required.): reimbursement - campaign expenses

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 ($)
12/12	Campos Communications 816 Ralfallen Houston, TX 77008	337.13

Purpose of payment (See instructions regarding type of information required.): reimbursement for Press Conf. expenses

-- 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 ($)
12/17	Cathy Griffin 1925 Lexington Houston, TX 77098	200.00

Purpose of payment (See instructions regarding type of information required.): election night party

-- 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 ($)
12/17	Claudia Williamson	1,089.90

Purpose of payment (See instructions regarding type of information required.): reimbursement - campaign expenses

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Printed on recycled paper

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 for this F: 8 of 9

2 FILER NAME: CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/29	Sarah Pitre 1912 Marshall Houston, TX 77098	25.97

8 Purpose of payment (See instructions regarding type of information required.): reimbursement - campaign expenses

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 ($)
12/29	Shannon Langrand 1401 Bonnie Brae Houston, TX 77098	500.00

Purpose of payment (See instructions regarding type of information required.): contract labor

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
11/26	African-American News & Issues 6130 Wheatley Houston, TX 77091	446.50

Purpose of payment (See instructions regarding type of information required.): news paper ad

** 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 ($)
11/27	Wells FARGO Bank Texas 1500 Waugh Drive, Houston, TX 77019	5.00

Purpose of payment (See instructions regarding type of information required.): Bank charge

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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 Schedule F: 9 of 9

2 FILER NAME: CLAUDIA WILLIAMSON

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/27	DAVID COLLINS 2925 BRIAR PARK DR., Apt. 950 HOUSTON, TEXAS 77042	$ 1,000 —

8 Purpose of payment (See instructions regarding type of information required.): CONTRIBUTION RETURNED

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 ($)

Purpose of payment (See instructions regarding type of information required.)

•• 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 ($)

Purpose of payment (See instructions regarding type of information required.)

•• 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 ($)

Purpose of payment (See instructions regarding type of information required.)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED