

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000000	2 Total pages this report: 1/7
3 CANDIDATE / OFFICEHOLDER NAME	TITLE Mr.	FIRST Brian E.	MI
	NICKNAME	LAST Wozniak	SUFFIX
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; P.O. Box 7U101	APT / SUITE #;	CITY; STATE; ZIP CODE Houston TX 77270
	5 CAMPAIGN TREASURER NAME		
TITLE Mrs.		FIRST Melissa M.	MI
NICKNAME		LAST Lord	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6906 Redwood Falls Pasadena TX 77505		
7 CAMPAIGN TREASURER PHONE	AREA CODE (832)	PHONE NUMBER 567-6291	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/09/2003 06/30/2003		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2003	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Other -- Houston City Council - At Large Position 1	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... 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			



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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: 3/7	
2 FILER NAME Mr. Brian E. Wozniak		3 ACCOUNT # (Ethics Commission filers) 00000000	
4 Date 05/28/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Francesca J. Beaumont 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 05/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Abel Cisneros, Jr. Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 45.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 06/30/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Houston Dock and Marine Council (PAC) Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 3000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 06/25/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marc Ingram Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 06/27/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Peg L. Jezercak Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 4/7	
2 FILER NAME Mr. Brian E. Wozniak		3 ACCOUNT # (Ethics Commission files) 00000000	
4 Date 06/19/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Garvis Marsh	7 Amount of contribution (\$) 431.89	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 06/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Teri Marsh	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 05/01/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Angela Mejia	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 04/29/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pipefitters Local Union No. 211	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 05/30/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pipefitters Local Union No. 211	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/7	
2 FILER NAME Mr. Brian E. Wozniak		3 ACCOUNT # (Ethics Commission filers) 00000000	
4 Date 05/02/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Plumbers Local Union No. 68 (PAC) 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 5000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 06/10/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Plumbers Local Union No. 68 (PAC) Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/23/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John J. Rankin Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 06/30/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Carla Winkler Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
6/7

2 FILER NAME
Mr. Brian E. Wozniak

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date
05/13/2003

5 Payee name
Marilyn Davenport

7 Amount
(\$)
25.00

6 Payee address; City; State; Zip Code
1438 Sue Barnett
Houston TX 77018

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

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

Date
05/14/2003

Payee name
Marilyn Davenport

Amount
(\$)
225.00

Payee address; City; State; Zip Code
1438 Sue Barnett
Houston TX 77018

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

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

Date
05/30/2003

Payee name
Fair Judges

Amount
(\$)
3900.00

Payee address; City; State; Zip Code
1348 Gardenia
Houston TX 77018

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

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

Date
06/18/2003

Payee name
Southwestern Bell Communications

Amount
(\$)
68.48

Payee address; City; State; Zip Code
P.O. Box 3025
Houston TX 77097

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

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: 7/7
2 FILER NAME Mr. Brian E. Wozniak		3 ACCOUNT # (Ethics Commission filers) 00000000
4 Date 05/13/2003	5 Payee name Susan Starnes 6 Payee address; City; State; Zip Code 5773 Woodway Drive #129 Houston TX 77057	7 Amount (\$) 4500.00
8 Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/27/2003	Payee name Susan Starnes Payee address; City; State; Zip Code 5773 Woodway Drive #129 Houston TX 77057	Amount (\$) 828.00
Purpose of expenditure (See instructions regarding type of information required.) Expense reimbursement		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/17/2003	Payee name Susan Starnes Payee address; City; State; Zip Code 5773 Woodway Drive #129 Houston TX 77057	Amount (\$) 4500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held