CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

FORM C/OH COVER SHEET PG 1

		4 400011174	T
The C/OH INSTRUCTION GO	UIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 PAGE #
		00099999	1 of 7
3 CANDIDATE/	MS/MRS/MR FIRST	MI	OFFICE HOE ONLY
OFFICEHOLDER NAME	Mr. Jarvis		OFFICE USE ONLY
INMIVIC	<u> </u>		Date Received 3
	NICKNAME LAST Johnson	SUFFIX	
	,		- TOPO E
4 CANDIDATE /			RECEIVED 0
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #; CI	ITY; STATE; ZIP CODE	ESB 2 3 788
MAILING	3400 Liberty Road	•	CITY SECRETAR
ADDRESS	Houston, TX 77026		Date Hand delivered or Date Postagraped
Change of Address	.]		Date Land of Sale .
			ST THE
			Receipt # Amount
5 CAMPAIGN	MS/MRS/MR FIRST Mrs. Velika	MI	1
TREASURER NAME	Mrs. Velika		Date Processed
NAME	NICKNAME LAST		Date Imaged
	Hines		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITI	E#; CITY; STATE:	
TREASURER	3400 Liberty Road	E#; CITY; STATE;	ZIP CODE
ADDRESS	Houston, TX 77026		
(Residence or business)			
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER	(281) 924-0098	EATENOION	
PHONE	(201) 924-0090		
8 REPORT TYPE	X January 15 30th day before election	on Runoff	168
	Soulday Bole of States	on Landin	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth day before election	n Exceeded \$500 limit	Final report (Attach C/OH - FR)
·			Talled report (Attach Oroll - 1 A)
9 PERIOD	Month Day Year	Month Day	Year .
COVERED	THROU		
	07/01/2006	12/31/200	96
10 ELECTION	ELECTION DATE ELECTION TYPE	E	
	Month Day Year		
	Primary	Runoff	General Special
11 OFFICE	OFFICE HELD (if any)	A DESIGN COLLECTIVE AND A STATE OF THE STATE	
II OFFICE	Houston City Council Dist. B	12 OFFICE SOUGHT (if known)	·
13 NOTICE	Direct comments and the second		
OF DIRECT CAMPAIGN	 Direct campaign expenditures are campaign expending candidates are required to disclose this information on 	nditures made by others without the car ilv if they receive notification of the direc	ndidate's prior consent or approval, it campaign expenditure.
EXPENDITURE	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	t delimpting it deposits to the control of the cont
BY OTHER	Name		¥
INDIVIDUALS			·
•	Address/PO 8ox; Apt. / Suite #: City: State: Zir.	- ·	
	Address/PO Box; Apt. / Suite #; City; State; Zip	p Code	
additional pages			
annisonal kales	•		-
<u> </u>			
	COTOR	1000	
	GO TO P	AGE 2	

Total Time to

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

			COVER	SHEET PG Z
14 C/OH NAME John	son, Jarvis (Mr.)		15 ACCOUNT # 00099999	(Ethics Commission filers)
16 NOTICE FROM	have been made wit	otice of political expenditures by political committees to support the candidate's or officeholder's knowledge or consent. Candidatey receive notice of such expenditures.	andidate / officeholder. tes and officeholders a	These expenditures may re required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
·	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	·
additional pages				· · · · · · · · · · · · · · · · · · ·
		COMMITTEE CAMPAIGN TREASURER ADDRESS		· .
17 CONTRIBUTION TOTALS	1. TOTAL I PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL I	POLITICAL EXPENDITURES	\$	6,575.00
CONTRIBUTION BALANCE	5. TOTAL F	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LY OF THE REPORTING PERIOD	\$	16,425.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
18 AFFIDAVIT				
	LYNETTE BAILEY JON Motary Public, State of Ten y Commission Expires 08-2		all information requi	
AFFIX NOTARY S	TAMP / SEAL ABOV	() () () () () () () () () ()	andidate or Officeho	23 day
of tellurary 2	0_ <i>DD</i>	tify which, witness my hand and seal of office.	An.	1
Signature of Officer admir	nistering oath	Print name of officer administering oath	Title of officer admi	inistering oath

Texas Ethics Cor	mmission P.O.Box 1207	70 Austin, Texas	78711-2070	(512)46	63-5800	1-800-325-850
- POLIT	ICAL EXPENDI	TURES			SCI	HEDULE F
The Instruct	пом Guide explains how to com	plete this form.		1 PAGE# Schedule: 1/9	5 Report: 3	8/7
2 FILER NAME	Johnson, Jarvis (Mr.)	· · · · · · · · · · · · · · · · · · ·		3 ACCOUNT # 00099999		mission filers)
4 Date	5 Payee name Burleigh, Oliver (Mr.)			00033333	7	Amount (\$)
08/28/2006	6 Payee address; 2613 Lelia Houston, TX 77026	City; State; Zip Code				\$285.00
8 Purpose of pa (See instruction Distribution of	ons regarding type of information	required.)	9 · · Complete if direc Candidate / Officehol		_I lefit Candidat	e/Officeholder **
	•		Office sought:			
☐ Payment fo	or travel outside Texas (complet	e boxes 10-16)	Office held:			
11 Departure city 15 Means of trans		12 Departure date	13 Destination city / I	ocation	14	Arrival date
4 Date	5 Payee name E & E Cleaners				7	Amount (\$)
07/22/2006	6 Payee address; 3802 Crain Street Houston, TX 77026	City; State; Zip Code				\$150.00
	I yment ons regarding type of information g for Event Visits	required.)	9 ** Complete if direct Candidate / Officehold		efit Candidate	e/Officeholder
Payment fo	or travel outside Texas (complete	e boxes 10-16)	Office sought: Office held:			•
10 Name of person	n(s) traveling on whose behalf the	ne expenditure for travel	was made (attach addition	onal pages if necess	sary)	
11 Departure city /	/ location	12 Departure date	13 Destination city / k	ocation	14	Arrival date
15 Means of trans	portation		16 Purpose of travel			
				-		

Date

09/29/2006

Payee name Galilee Missionary Baptist Church

6616 D S Bailey Lane Houston, TX 77091

6 Payee address; City; State; Zip Code

rex	xas Ethics Con	nmission P.O.Box 120	70 Austin, Texas	78711-2070		(512)46	3-5800	1-800-325-850
***	POLITI	CAL EXPEND	TURES				S	CHEDULE F
	The Instruction	ON GUIDE explains how to cor	nplete this form.		1	PAGE # Schedule: 2/5	Report	: 4/7
2	FILER NAME	Johnson, Jarvis (Mr.)		· · · · · · · · · · · · · · · · · · ·	3	ACCOUNT # 00099999	(Ethics Co	ommission filers)
4	Date	5 Payee name Ford, Yolanda (Ms.)			<u>. </u>		7	Amount (\$)
	07/15/2006	6 Payee address; 16514 Lacy Lane Missouri City, TX 774	City; State; Zip Code	•••••	•••	•••••		\$2,500.00
8	Purpose of pay (See instruction Consulting	yment ns regarding type of informatio	n required.)	9 ** Complete if direc Candidate / Officehol	t ex Ider	penditure to bene name:	efit Candi	date/Officeholder **
	Payment fo	or travel outside Texas (comple	ete boxes 10-16)	Office sought:				
10	Name of person	n(s) traveling on whose behalf	the expenditure for travel	L was made (attach addit	iona	l pages if necess	ary)	
11	Departure city /	location	12 Departure date	13 Destination city / I	oca	tion		14 Arrival date
15	Means of trans	portation		16 Purpose of travel		4		

		·
3	Purpose of payment (See instructions regarding type of information required.) Advertisement	9 · · Complete if direct expenditure to benefit Candidate/Officeholder · · Candidate / Officeholder name:
		Office sought;
	Payment for travel outside Texas (complete boxes 10-16)	Office held:
0	Name of person(s) traveling on whose behalf the expenditure for tra	vel was made (attach additional pages if necessary)

15 Magaz of transportation		40 -	
Tr Departure dity / location	12 Departure date	13 Destination city / location	14 Arrival date
11 Departure city / location	12 Deporture dete	42 Destination situ (Inserting	44 4-1-1-1-1

Amount (\$)

\$100.00

Texas Ethics Commission P.O.Box 120	070 Austin, Texas	78711-2070	(512)46	i3-5800	1-800-325-8506
► POLITICAL EXPEND	ITURES			S(CHEDULE F
The Instruction Guide explains how to co	mplete this form.		1 PAGE# Schedule: 3/5	Report	r: 5/7
2 FILER NAME Johnson, Jarvis (Mr.)			3 ACCOUNT# 00099999		ommission filers)
4 Date 5 Payee name Glenn, John (Mr.)				7	Amount (\$)
07/15/2006 6 Payee address; Post Office 130932 Houston, TX 77219	City; State; Zip Code	·	•••••		\$665.00
Purpose of payment (See instructions regarding type of informatic Consulting		9 ** Complete if direct Candidate / Officehol Office sought:	t expenditure to bene ider name:	efit Candid	date/Officeholder **
Payment for travel outside Texas (complete 10 Name of person(s) traveling on whose behalf		Office held: was made (attach additi	ional pages if necess	ary)	
11 Departure city / location	12 Departure date	13 Destination city / lo	ocation		14 Arrival date
15 Means of transportation		16 Purpose of travel			
4 Date 5 Payee name Johnson, Jarvis (Mr.)				7	Amount (\$)
12/26/2006 6 Payee address; 1051 Cottage Oak Houston, TX 77091	City; State; Zip Code				\$525.00
8 Purpose of payment (See instructions regarding type of informatio Christmas Baskets for Seniors	n required.)	9 ** Complete if direct Candidate / Officehold		fit Candid	late/Officeholder **

		Office sought:	
Payment for travel outside Texas (complete boxes 10-16)		Office held:	
Name of person(s) traveling on whose behalf the expenditure for travel v		I was made (attach additional pages if nece	ssary)
-			
1 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
			·
Means of transportation		16 Purpose of travel	
			Ţ.
			·
·			•

POLITI	CAL EXPENDIT	TURE\$			S	CHEDULE F
The Instructi	ON GUIDE explains how to comp	plete this form.		1 PAGE # Schedule: 4/5	Repor	t: 6/7
2 FILER NAME	Johnson, Jarvis (Mr.)			3 ACCOUNT# 00099999	(Ethics Commission filers)	
4 Date	5 Payee name Krayon Catering			<u> </u>	7	Amount (\$)
09/09/2006		City; State; Zip Code				\$350.00 ·
	yment ns regarding type of information City Council Members	9 ** Complete if direct Candidate / Officeho	t expenditure to beni Ider name:	efit Cand	idate/Officeholder	
Payment for travel outside Texas (complete boxes 10-16)			Office sought: Office held:			
10 Name of perso	n(s) traveling on whose behalf th	ne expenditure for travel	was made (attach addit	ional pages if necess	sary)	11.00
11 Departure city	location	12 Departure date	13 Destination city / location			14 Arrival date
15 Means of trans	portation		16 Purpose of travel			
4 Date	5 Payee name R.O.W.D.Y. Foundation Houston, TX				7	Amount (\$)
07/22/2006	6 Payee address; C	ity; State; Zip Code		•••••	÷	\$600.00
8 Purpose of pay (See instruction T-Shirt Produ	ns regarding type of information	required.)	9 ** Complete if direct Candidate / Officehol	t expenditure to bene der name:	efit Candi	date/Officeholder
□ Baymant fo		40.40	Office sought: Office held:			
	r travel outside Texas (complete			onal pages if necess	ary)	·
11 Departure city /	location	12 Departure date	13 Destination city / lo	ocation		14 Arrival date
15 Means of transp	Portation	· <u> </u>	16 Purpose of travel			
	-	,	•			

POLITICAL EXPENDITURES

SCHEDULE F

		·		<u> </u>			
The Instruction	ON GUIDE explains how to comp	elete this form.		1 PAGE# Schedule: 5/5	Repor	t: 7/7	
2 FILER NAME	Johnson, Jarvis (Mr.)			3 ACCOUNT # 00099999	(Ethics Commission filers)		
4 Date	5 Payee name Saint Monica's Catholic	Church			7 Amount (\$)		
09/28/2006 6 Payee address; City; State; Zip Code 8421 West Montgomery Road Houston, TX 77088						\$500.00	
8 Purpose of payment (See instructions regarding type of information required.) Sponsorship of Event. 9 ** Complete if direct expenditure to be Candidate / Officeholder name:					I. efit Cand	idate/Officeholder **	
		•	Office sought:				
· · · · · · · · · · · · · · · · · · ·	or travel outside Texas (complete	Office held:			. <u>-</u>		
10 Name of perso	n(s) traveling on whose behalf th	e expenditure for travel	was made (attach addit	onal pages if necess	загу)		
11 Departure city	/ location	12 Departure date	13 Destination city / location			14 Arrival date	
15 Means of transportation			16 Purpose of travel				
			10 7 diposo di dato.				
4 Date	5 Payee name Thompson, Donna (Ms.)			7	Amount (\$)	
07/18/2006	Sunnyvale Forest	ity; State; Zip Code	· · · · · · · · · · · · · · · · · · ·			\$900.00	
	Houston, TX 77088						
	/ment ns regarding type of information g Coordination	required.)	9 · · Complete if direct Candidate / Officehol		l efit Cand	idate/Officeholder	
☐ Payment fo	or travel outside Texas (complete	hoves 10 16)	Office sought: Office held:				
· · · ·	n(s) traveling on whose behalf th			onal pages if necess	ary)	· · · · · · · · · · · · · · · · · · ·	
11 Departure city	location	12 Departure date	13 Destination city / I	ocation		14 Arrival date	
15 Means of transportation			16 Purpose of travel		_		