

Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8505

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)	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	TITLE Mr.	FIRST Louis	MI R.
	NICKNAME	LAST Canales	SUFFIX
OFFICE USE ONLY			
Date Received			
Date Hand-delivered or Date Postmarked			
Receipt #		Amount	
Date Processed			
Date Imaged			
4 CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX: P.O. Box 51	APT / SUITE #: Brookshire	CITY: STATE: ZIP CODE TX 77423
<input type="checkbox"/> Change of Address			
5 CAMPAIGN TREASURER NAME	TITLE Mrs.	FIRST Jan	MI
	NICKNAME	LAST Canales	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 33630 Hoff Rd.	APT / SUITE #:	CITY: STATE: ZIP CODE Brookshire TX 77423
CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 325-5508	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 type="checkbox"/> July 15 <input checked="" 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 9 / 28 / 02	THROUGH	Month Day Year 10 / 26 / 02
10 ELECTION	ELECTION DATE Month Day Year 11 / 05 / 02		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) Co. Commissioner, Pct. 4		12 OFFICE SOUGHT (if known) Co. Commissioner, Pct. 4
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		
<input type="checkbox"/> additional pages			

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-8800 1-800-325-8508

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS		SCHEDULE A1 (FOR FORMS GCM, GCM-SS, SC-C/M, SC-SPAC, SPAC & SPAC-SS)	
The instruction Guide explains how to complete this form.		1 Total pages this Schedule A1: 1	
2 FILER NAME Louis R. Canales		3 ACCOUNT # (Ethics Commission Use)	
4 Date 10/10/02	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (DB) Wes Buller (Jean Buller Smith)	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 18511 Meadows Way Houston, TX 77024			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 10/15/02	Full name of contributor <input type="checkbox"/> out-of-state PAC (DB) Gregory R. Travis	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1500 City West Blvd. Houston TX 77049 (5503 Westerbank) Fulshear TX 77441			
Principal occupation (Optional)		Employer (Optional)	
Date 10/16/02	Full name of contributor <input type="checkbox"/> out-of-state PAC (DB) Geraldine Leggett	Amount of contribution (\$) 15.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code P.O. Box 63 Brookshire, TX 77423			
Principal occupation (Optional)		Employer (Optional)	
Date 10/18/02	Full name of contributor <input type="checkbox"/> out-of-state PAC (DB) Arcana Davis	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code P.O. Box 1232 Waller, TX 77484			
Principal occupation (Optional)		Employer (Optional)	
Date 10/18/02	Full name of contributor <input type="checkbox"/> out-of-state PAC (DB) Norman B. Handley	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 737 Bonham St. Columbus, TX 76934			
Principal occupation (Optional)		Employer (Optional)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 1

2 FILER NAME

Louis R. Canales

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

10/21/02

The Times Tribune

80.00

6 Payee address: City: State: Zip Code

P.O. Box 1549 Brookshire, TX 77423

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

newspaper ads

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

10/21/02

Katy Times

164.25

Payee address: City: State: Zip Code

5319 E. 5th Katy, TX 77493

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

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

10/24/02

Postmark

945.60

Payee address: City: State: Zip Code

1507 Ricefield Dr. Ste. 200 Houston, TX 77084

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

direct mail-out

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

Payee address: City: State: Zip Code

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

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought / held

CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALSFORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission filers)

16 SUPPORTING POLITICAL COMMITTEE(S)

additional pages

-- This listing includes 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. Candidates and officeholders are required to report this information only. Candidates and officeholders are required to report this information only.

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

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	\$
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 335. ⁰⁰

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

15 ACCOUNT # (Ethics Commission file)

16 SUPPORTING POLITICAL COMMITTEE(S)

** This listing includes 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

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

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 335.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 1,189.85

OUTSTANDING LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

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.

Louis Canales
Signature of Candidate or Officeholder

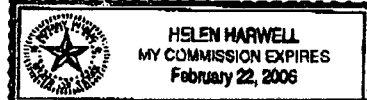
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Louis Canales this the 28 day

Oct. 20 02 to certify which, witness my hand and seal of office.

Helen Harwell
Signature of officer administering oath

Printed name of officer administering oath.



Title of officer administering oath