

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) 00000004	2 PAGE # 1 of 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Mark	MI
	NICKNAME	LAST Lee	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	6524 San Felipe, PMB 124 Houston, TX 77057	
	AREA CODE	PHONE NUMBER	EXTENSION
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Alan	MI
	NICKNAME	LAST Guttman	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	7670 Woodway, Ste. 110 Houston, TX 77063		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(713) 978-7701	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		<input type="checkbox"/> Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	07/01/2005		09/29/2005
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
	11/08/2005		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Houston City Council, Dist. C	
14 NOTICE OF 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		
GO TO PAGE 2			



CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Lee, Mark (Mr.)

16 ACCOUNT # (Ethics Commission filers)
00000004

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. ..

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

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	350.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,970.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	54.13
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4. TOTAL POLITICAL EXPENDITURES	\$	18,529.53
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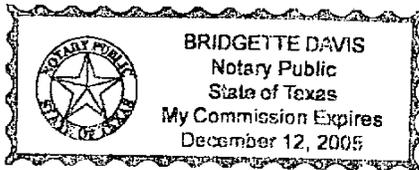
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	20,193.75
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mark Lee, this the 11th day of October, 2005, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Bridgette Davis
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/10 Report: 3/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/13/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Anderson, Mavis 6 Contributor address; City; State; Zip Code Houston, TX 770254017	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/21/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Appel, Madeleine Contributor address; City; State; Zip Code Houston, TX 770962501	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Black, George Contributor address; City; State; Zip Code League City, TX 77573	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brasington, David Contributor address; City; State; Zip Code Dickinson, TX 775399105	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/04/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chae, Alexander Contributor address; City; State; Zip Code Houston, TX 770246832	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/10 Report: 4/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/09/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Amy 6 Contributor address; City; State; Zip Code Pearland, TX 775848201	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Chin Contributor address; City; State; Zip Code Houston, TX 770764905	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Chin Contributor address; City; State; Zip Code Houston, TX 770764905	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Chin Contributor address; City; State; Zip Code Houston, TX 770764905	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Chin Contributor address; City; State; Zip Code Houston, TX 770764905	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/10 Report: 5/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/19/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chen, Kay 6 Contributor address; City; State; Zip Code [REDACTED] Sugar Land, TX 77479	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/19/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chou, Hsi Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770244205	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Coleman, Garnet Contributor address; City; State; Zip Code [REDACTED] Houston, TX 772880140	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/27/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Crane, Franci Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770985414	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/07/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Foster, Charles Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770064013	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/10 Report: 6/17

2 FILER NAME Lee, Mark (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

5 Full name of contributor out-of-state PAC(ID# _____)
Gondo, Glen

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

09/09/2005

6 Contributor address; City; State; Zip Code

Houston, TX 770274717

\$200.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
Guttman, Alan

Amount of contribution (\$)

In-kind contribution description (if applicable)

08/21/2005

Contributor address; City; State; Zip Code

Houston, TX 770964836

\$300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# 721482960)
Harry Lee for Sheriff Re-Election Campaign

Amount of contribution (\$)

In-kind contribution description (if applicable)

08/19/2005

Contributor address; City; State; Zip Code

Gretna, LA 70054-0188

\$2,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
Hsieh, Kun

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/09/2005

Contributor address; City; State; Zip Code

Katy, TX 77494

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
Hsu, Peter

Amount of contribution (\$)

In-kind contribution description (if applicable)

09/09/2005

Contributor address; City; State; Zip Code

Bellaire, TX 77401

\$300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/10 Report: 7/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/09/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jaffry, Adil	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code Sugar Land, TX 774794248			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/11/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Knott, Myrleen	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Alvin, TX 775118925			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lee, Jennie	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Sugar Land, TX 77479			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lee, Robert	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Sugar Land, TX 77478			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lee, Si	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code Humble, TX 773451238			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/10 Report: 8/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/09/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lee, Wea 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770631402	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Li, Kenneth Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770365112	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lien, Louis Contributor address; City; State; Zip Code [REDACTED] Bellaire, TX 77401	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lin, Dawn Contributor address; City; State; Zip Code [REDACTED] Sugar Land, TX 774782664	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/18/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martinez, Johnny Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77083	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/10 Report: 9/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 07/21/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mason, Dwayne 6 Contributor address; City; State; Zip Code Houston, TX 770952103	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/19/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nip, Dan Contributor address; City; State; Zip Code Houston, TX 770246315	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) On Leong Chinese Merchant Association Contributor address; City; State; Zip Code Houston, TX 770363414	Amount of contribution (\$) \$400.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rea, Ronald Contributor address; City; State; Zip Code Houston, TX 770636224	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tsai, Shu-o Contributor address; City; State; Zip Code Houston, TX 770836587	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/10 Report: 10/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/09/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tsai, Yu 6 Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77080	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/15/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Turner, Leticia Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770913610	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Walsh, Michael Contributor address; City; State; Zip Code [REDACTED] Houston, TX	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Woo, Herman Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770963734	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/21/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Woo, Ken Contributor address; City; State; Zip Code [REDACTED] Oklahoma City, OK 731354203	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/10 Report: 11/17	
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004	
4 Date 09/09/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wu, Gorpau 6 Contributor address; City; State; Zip Code [REDACTED] Sugar Land, TX 774792437	7 Amount of contribution (\$) \$400.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wu, Wen-Shing Contributor address; City; State; Zip Code [REDACTED] Bellaire, TX 774015314	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Yang, George Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770048930	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Yang, Kenneth Contributor address; City; State; Zip Code [REDACTED] Houston, TX 770422318	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/20/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Yao, Fu Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77074	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/10 Report: 12/17

2 FILER NAME Lee, Mark (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000004

4 Date

5 Full name of contributor out-of-state PAC(ID# _____)
Yee, Soy

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

07/12/2005

6 Contributor address; City; State; Zip Code

Houston, TX 770763138

\$70.00

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
Yeh, Daniel

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/09/2005

Contributor address; City; State; Zip Code

Sugar Land, TX 774792545

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC(ID# _____)
Yeh, William

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/09/2005

Contributor address; City; State; Zip Code

Bellaire, TX 774015312

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/5 Report: 13/17
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004
4 Date 07/05/2005	5 Payee name Authorize.net 6 Payee address; City; State; Zip Code [REDACTED] American Fork, UT 84003	7 Amount (\$) \$21.00
8 Purpose of payment (See instructions regarding type of information required.) Bank Service Charges		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/02/2005	Payee name Authorize.net Payee address; City; State; Zip Code [REDACTED] American Fork, UT 84003	Amount (\$) \$20.20
Purpose of payment (See instructions regarding type of information required.) Bank Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/02/2005	Payee name Authorize.net Payee address; City; State; Zip Code [REDACTED] American Fork, UT 84003	Amount (\$) \$20.00
Purpose of payment (See instructions regarding type of information required.) Bank Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/30/2005	Payee name Campaign Strategies Payee address; City; State; Zip Code [REDACTED] Houston, TX 77006	Amount (\$) \$1,629.17
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:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 14/17
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004
4 Date 08/18/2005	5 Payee name City of Houston 6 Payee address; City; State; Zip Code [REDACTED] Houston, TX 77002	7 Amount (\$) \$500.00
8 Purpose of payment (See instructions regarding type of information required.) City Council Filing Fee		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/01/2005	Payee name City of Houston Payee address; City; State; Zip Code [REDACTED] Houston, TX 77002	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) City Council Filing Fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/18/2005	Payee name Corron, Amy Payee address; City; State; Zip Code [REDACTED] Houston, TX 77062	Amount (\$) \$1,485.50
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 08/17/2005	Payee name Corron, Amy Payee address; City; State; Zip Code [REDACTED] Houston, TX 77062	Amount (\$) \$1,768.39
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:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 15/17
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004
4 Date 09/02/2005	5 Payee name Corron, Amy 6 Payee address; City; State; Zip Code [REDACTED] Houston, TX 77062	7 Amount (\$) \$2,553.00
8 Purpose of payment (See instructions regarding type of information required.) Contract Labor		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/02/2005	Payee name First National Bank of Omaha Payee address; City; State; Zip Code [REDACTED] Omaha, NE 68103	Amount (\$) \$35.50
Purpose of payment (See instructions regarding type of information required.) Bank Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/02/2005	Payee name First National Bank of Omaha Payee address; City; State; Zip Code [REDACTED] Omaha, NE 68103	Amount (\$) \$35.85
Purpose of payment (See instructions regarding type of information required.) Bank Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 09/28/2005	Payee name Harris County Democratic Party Payee address; City; State; Zip Code [REDACTED] Houston, TX 77008	Amount (\$) \$1,250.00
Purpose of payment (See instructions regarding type of information required.) Sponsorships		** 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 PAGE # Schedule: 4/5 Report: 16/17
2 FILER NAME Lee, Mark (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000004
4 Date 09/07/2005	5 Payee name Harris County Tejano Democrats 6 Payee address; City; State; Zip Code [REDACTED] Houston, TX 77009	7 Amount (\$) \$250.00
8 Purpose of payment (See instructions regarding type of information required.) Sponsorships		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/11/2005	Payee name Lone Star Strategies Payee address; City; State; Zip Code [REDACTED] Houston, TX 77063	Amount (\$) \$711.08
Purpose of payment (See instructions regarding type of information required.) Fund-raising & Compliance		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/05/2005	Payee name Lone Star Strategies Payee address; City; State; Zip Code [REDACTED] Houston, TX 77063	Amount (\$) \$1,711.08
Purpose of payment (See instructions regarding type of information required.) Fund-raising & Compliance		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/08/2005	Payee name Lone Star Strategies Payee address; City; State; Zip Code [REDACTED] Houston, TX 77063	Amount (\$) \$1,076.65
Purpose of payment (See instructions regarding type of information required.) Fund-raising & Compliance		** 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 PAGE #
Schedule: 5/5 Report: 17/17

2 FILER NAME Lee, Mark (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000004

4 Date	5 Payee name Lone Star Strategies	7 Amount (\$)
09/07/2005	6 Payee address; City; State; Zip Code [REDACTED] Houston, TX 77063	\$1,531.71

8 Purpose of payment (See instructions regarding type of information required.)
Fund-raising & Compliance

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name Paper Chase	Amount (\$)
09/15/2005	Payee address; City; State; Zip Code [REDACTED] Houston, TX 77056	\$67.28

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

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name Sprint Digital Print	Amount (\$)
08/09/2005	Payee address; City; State; Zip Code [REDACTED] Houston, TX 77080	\$2,938.99

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

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:

Office sought:
Office held:

Date	Payee name U S Postmaster	Amount (\$)
09/16/2005	Payee address; City; State; Zip Code [REDACTED] Houston, TX 77057	\$370.00

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

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:

Office sought:
Office held: