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)

2 PAGE # 1 of 11

OFFICE USE ONLY

Date Received

RECEIVED JAN 17 2006 CITY SECRETARY

Date Hand Delivered / Postmarked

Receipt #

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Gordon | MI

NICKNAME | LAST: Quan | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

P.M. Box 65
5090 Richmond Avenue
Houston, TX 77056

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Mike | MI

NICKNAME | LAST: Garver | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

5402 Lawndale
Houston, TX 77023

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(713) 921-2929

9 REPORT TYPE

- [X] 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)

10 PERIOD COVERED

Month Day Year — THROUGH — Month Day Year

07/01/2005 — 12/31/2005

11 ELECTION

ELECTION DATE: Month Day Year

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): City Council At Large Pos 2

13 OFFICE SOUGHT (if known)

14 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

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

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

15 C/OH NAME Quan, Gordon

16 ACCOUNT # [Ethics Commission filers]

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. ..

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 51.55
	4.	TOTAL POLITICAL EXPENDITURES	$ 17,383.47
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 63,760.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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.

KAREN L DESANTIS
My Commission Expires
November 20, 2009

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said GORDON QUAN, this the 17th day of January, 20 06, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath
	KAREN L. DESANTIS	Notary

Revised 11/05/2003

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/9 Report: 3/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/02/2005	Alief Community Association P.O. Box 1712 Alief, TX 77411	$100.00

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

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 ($)
09/25/2005	American-Chinese Legion Post 596 c/o J.D Hong 1134 Helms Rd. Houston, TX 77088	$100.00

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

** 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 ($)
11/02/2005	Asian American Advertising Foundation c/o Pura Vida Group 4606 Chiappero Trail Austin, TX 78731	$75.00

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

** 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 ($)
09/29/2005	Asian American Family Services 6220 Westpark, Ste. 228 Houston, TX 77057	$2,000.00

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

** 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: 2/9 Report: 4/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/29/2005	Asian American Legal Defense & Education Fund 99 Hudson St., 12th Fl New York, NY 10013	$50.00

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

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 ($)
07/05/2005	Bellamy, Abby 10610 Hanging Moss Trail Charlotte, NC 28227	$500.00

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

** 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 ($)
07/21/2005	Bellamy, Abby 10610 Hanging Moss Trail Charlotte, NC 28227	$750.00

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

** 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 ($)
11/02/2005	Chinese Community Center 9800 Town Park Houston, TX 77036	$500.00

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

** 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: 3/9 Report: 5/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/20/2005	Continental Airlines 1600 Smith St. Houston, TX 77002	$89.40

8 Purpose of payment (See instructions regarding type of information required.)
Texas Asian American Chamber of Commerce meeting travel expense

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 ($)
12/07/2005	Crinejo, Marta 7575 Katy Freeway, #97 Houston, TX 77024	$384.88

Purpose of payment (See instructions regarding type of information required.)
Reimbursement - Indian food holiday 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 ($)
09/29/2005	Fifth Ward Enrichment Program 4014 Market, Ste. 105 Houston, TX 77020	$100.00

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

** 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 ($)
09/29/2005	Galleria Chamber of Commerce 5075 Westheimer, Ste. 660 Houston, TX 77057	$300.00

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

** 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: 4/9 Report: 6/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/29/2005	Garnet Coleman Campaign P.O. Box 88140 Houston, TX 77288	$100.00

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

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 ($)
09/29/2005	Houston Area Cancer Drive c/o Natl Cancer Coalition P.O. Box 8908 Topeka, KS 66608	$25.00

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

** 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 ($)
12/07/2005	La Rosa Family Services P.O. Box 16042 Houston, TX 77242	$100.00

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

** 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 ($)
09/29/2005	Leadership Houston 3015 Richmond, Ste. 200 Houston, TX 77098	$100.00

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

** 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: 5/9 Report: 7/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/25/2005	Let the Fashions Begin 440 Louisiana, Ste. 475 Houston, TX 77002	$1,800.00

8 Purpose of payment (See instructions regarding type of information required.)
Sickle Cell event sponsorship & donation

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 ($)
12/07/2005	Make a Wish Foundation P.O. Box 97104 Washington, DC 20090-7140	$20.00

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

** 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 ($)
12/22/2005	Monarch Printing Co., Inc. 6605 McGrew Houston, TX 77087	$2,261.35

Purpose of payment (See instructions regarding type of information required.)
Printing - 2005 Christmas Cards

** 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 ($)
10/24/2005	Muscular Dystrophy Associaton 3300 E. Sunrise Dr. Tucson, AZ 85718	$25.00

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

** 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: 6/9 Report: 8/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/29/2005	NMSS Lone Star Chapter P.O. Box 3447 Houston, TX 77253	$25.00

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

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 ($)
11/02/2005	Ocean Palace 11215 Bellaire Blvd Houston, TX 77072	$600.00

Purpose of payment (See instructions regarding type of information required.)
Lunch expense for Honda event

** 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 ($)
09/29/2005	Political Asylum Project of Austin One Highland Center 314 E. Highland Mall Blvd, Ste. 50 Austin, TX 78752	$100.00

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

** 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 ($)
12/07/2005	Political Asylum Project of Austin One Highland Center 314 E. Highland Mall Blvd, Ste. 501 Austin, TX 78752	$100.00

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

** 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: 7/9 Report: 9/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/11/2005	Quan, Burdette, Perez, PC 5177 Richmond Avenue, Suite 800 Houston, TX 77056-8666	$575.27

8 Purpose of payment (See instructions regarding type of information required.)
Copies & postage

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 ($)
11/03/2005	Sakurambo School 3000 Blodgett St. Houston, TX 77004	$90.00

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

** 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 ($)
11/02/2005	Southeast Coalition of Civic Clubs c/o Bessie Swindle 4103 Madden Lane Houston, TX 77047	$100.00

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

** 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 ($)
07/21/2005	TanChes Global Management, Inc. P. O. Box 460666 Houston, TX 77056-8666	$27.06

Purpose of payment (See instructions regarding type of information required.)
Web site hosting fee

** 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: 8/9 Report: 10/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
08/11/2005	TanChes Global Management, Inc. P. O. Box 460666 Houston, TX 77056-8666	$27.06

8 Purpose of payment (See instructions regarding type of information required.)
Web site hosting fee

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 ($)
12/07/2005	Taping for the Blind, Inc. 3935 Essex Lane Houston, TX 77027	$25.00

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

** 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 ($)
08/17/2005	Ted Lieu for Assembly P O Box 1309 Torrance, CA 90505	$1,000.00

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

** 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 ($)
10/24/2005	The American Legoin Post 472 P.O. Box 472 Houston, TX 77262	$50.00

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

** 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: 9/9 Report: 11/11

2 FILER NAME Quan, Gordon

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/07/2005	Theatre Under The Stars 800 Bagby, Ste. 200 Houston, TX 77002	$5,000.00

8 Purpose of payment (See instructions regarding type of information required.)
Sponsor for gala

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 ($)
10/25/2005	Vielman, Jerome 2310 Mason St., Apt A Houston, TX 77057	$231.90

Purpose of payment (See instructions regarding type of information required.)
Travel expense for hearing in Washington, DC

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