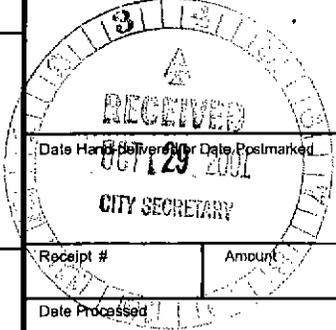


SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 11	2 Total pages this report: 1/4
3 COMMITTEE NAME Let the People Vote		OFFICE USE ONLY Date Received  Date Hand Delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 79216 Houston TX 77279		
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Bob NICKNAME LAST SUFFIX Lemer		
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE P.O. Box 79216 Houston TX 77279		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 79216 Houston TX 77279		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 464-2004		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year 09/28/2001 THROUGH 10/27/2001		
11 ELECTION	ELECTION DATE Month Day Year 11/06/2001	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME

Let the People Vote

ACCOUNT # (Ethics Commission filers)

11

13 COMMITTEE PURPOSE

(Attach lists on plain paper to complete this report if necessary.)

CANDIDATE

CANDIDATE / OFFICEHOLDER NAME

OFFICEHOLDER

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

SUPPORT

BALLOT IDENTIFICATION / #

ELECTION DATE
Month Day Year

OPPOSE

11/06/2001

ASSIST
(officeholders only)

MEASURE

DESCRIPTION

14 NO REPORTABLE ACTIVITY

Check if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

15 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)

\$ 9030.00

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

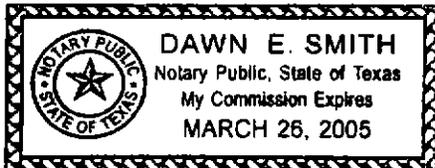
\$ 2599.72

OUTSTANDING LOAN TOTALS

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

\$ 20803.00

16 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.

Bob Lemer

Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bob Lemer, this the 29th day of October, 20 01, to certify which, witness my hand and seal of office.

Dawn E. Smith

Signature of officer administering oath

Dawn E. Smith

Printed name of officer administering oath

Notary Public

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:
2/4

2 FILER NAME
Let the People Vote

3 ACCOUNT # (Ethics Commission filers)
11

4 Date

10/26/2001

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

John Furse

6 Contributor address: City; State; Zip Code

Boston MA 02116

7 Amount of contribution (\$)

9000.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

10/11/2001

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

Juan Gatchik

Contributor address: City; State; Zip Code

Houston TX 77057

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 3/4
2 FILER NAME Let the People Vote		3 ACCOUNT # (Ethics Commission filers) 11
4 TOTAL OF UNITEMIZED LOANS: ⇨⇨⇨⇨⇨⇨		\$ 0.00
5 Date of loan 10/15/2001	7 Name of lender <input type="checkbox"/> out-of-state PAC(ID# _____) Bob Lemer	9 Loan Amount (\$) 2500.00
6 Is lender a financial Institution? N	8 Lender address; City; State; Zip Code P.O. Box79216 Houston TX 77279	10 Interest rate 0
		11 Maturity date 10/15/2002
12 Description of Collateral <input checked="" type="checkbox"/> none		
13 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	14 Name of guarantor 15 Guarantor address; City; State; Zip Code	16 Amount Guaranteed (\$)
17 Principal Occupation		18 Employer

POLITICAL EXPENDITURES**SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** Total pages report: 4/4**2 FILER NAME**

Let the People Vote

3 ACCOUNT # (Ethics Commission filers)

11

4 Date	5 Payee name	7 Amount (\$)
10/23/2001	Let the People Vote on Light Rail ----- 6 Payee address; City; State; Zip Code P.O. Box 79246 Houston TX 77279	96.72

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

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

Date	Payee name	Amount (\$)
10/15/2001	Southwest Bank ----- Payee address; City; State; Zip Code 5 Post Oak Park Houston TX 77027	3.00

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

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

Date	Payee name	Amount (\$)
10/15/2001	W Briscoe Swan ----- Payee address; City; State; Zip Code 1900 North Loop West Suite 500 Houston TX 77018	2500.00

Purpose of expenditure (See instructions regarding type of information required.)
Legal Expenses for the Rail and Tax Referendums

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