

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)	2 Total pages filed:
3 COMMITTEE NAME Houstonians for Mobility		OFFICE USE ONLY	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:
	STATE:	ZIP CODE:	
55 Waugh Drive, Suite 610 Houston, TX 77007		Date Received	
		Receipt #	
5 CAMPAIGN TREASURER NAME	TITLE	FIRST	MI
	NICKNAME	LAST	SUFFIX
Jim Thompson		HD / PM	Amount
		Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:
	STATE:	ZIP CODE:	
6110 Clarkson Lane Houston, TX 77055			
7 CAMPAIGN TREASURER'S MAILING ADDRESS	STREET OR PO BOX:	APT / SUITE #:	CITY:
	STATE:	ZIP CODE:	
<input checked="" type="checkbox"/> Same as Above			
<input type="checkbox"/> Change of Address (from Form STA)			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	956-4100	
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 limit
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (attach SPAC-DR)
		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
10 PERIOD COVERED	Month	Day	Year
	10	28	2001
	THROUGH		Month
			Day
			Year
			12 / 31 / 2001
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	11	6	2001
	<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 AND TOTALS

FORM SPAC COVER SHEET PG 2

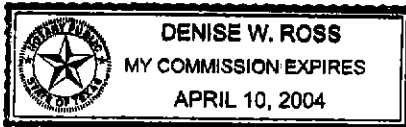
12 COMMITTEE NAME Houstonians for Mobility		13 ACCOUNT # (Ethics Commission filers)
14 NO REPORTABLE ACTIVITY	<input type="checkbox"/> Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$199,400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 366,189.75
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.



Signature of campaign treasurer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James F. Thompson, this the 15th day of January, ~~19~~ 2001, to certify which, witness my hand and seal of office.

Denise W. Ross
Signature of officer administering oath

Denise W. Ross
Print name of officer administering oath

Notary
Title of officer administering oath

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.			Total pages this Schedule A1: 2
FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 10-30-2001	Full name of contributor Travis Tower AEW/McCord, L.P. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77002	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor One City Centre AEW/McCord, L.P. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77002	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor Julie Gilbert <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77096	Amount of contribution (\$) \$50.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Atser, L.P. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77060	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Arnold De Anda <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77087	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-3-2001	Full name of contributor Harry W. Reed <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77056	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A1
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.			Total pages this Schedule A1: 2
FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 11-5-2001	Full name of contributor <input type="checkbox"/> out of state PAC Chris Demopoulos	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77098		
Principal occupation (Optional)		Employer (Optional)	
Date 11-6-2001	Full name of contributor <input type="checkbox"/> out of state PAC North Houston Association	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77060		
Principal occupation (Optional)		Employer (Optional)	
Date 11-7-2001	Full name of contributor <input type="checkbox"/> out of state PAC Cheryl Thompson-Draper	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77001-0067		
Principal occupation (Optional)		Employer (Optional)	
Date 11-23-2001	Full name of contributor <input type="checkbox"/> out of state PAC Catherine Schmidt	Amount of contribution (\$) \$100.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code [REDACTED] Ambler, PA 19002		
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE C
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.			Total pages this Schedule : 6
FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 10-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Edwards and Kelcey, Inc.	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 654 N. Sam Houston Pwy. E. #144 Houston, TX 77060		
Principal occupation (Optional)		Employer (Optional)	
Date 10-28-2001	Full name of contributor <input type="checkbox"/> out of state PAC Pennzoil-Quaker State Company	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code PO Box 2967 Houston, TX 77252-2967		
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC Parkway Investments	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 55 Waugh Dr., Ste. 1111 Houston, TX 77007		
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC ESPA Corp.	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 7120 Grand Blvd., Ste 100 Houston, TX 77054		
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC Bank One	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code PO Box 2629 Houston, TX 77252-2629		
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC American General Corp.	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 2929 Allen Parkway Houston, TX 77019		
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
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SCHEDULE C
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.			Total pages this Schedule : 6
FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC Harding ESE, Inc.	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 9800 Richmond Ave., Ste 200 Houston, TX 77042		
Principal occupation (Optional)		Employer (Optional)	
Date 10-30-2001	Full name of contributor <input type="checkbox"/> out of state PAC Hanson Aggregates Central	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 8505 Freeport Pkwy., Ste. 200 Irving, TX 75063		
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC Jacobs Engineering	Amount of contribution (\$) \$12,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code P.O. Box 98033 Baton Rouge, LA 70898		
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC Montgomery Watson	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 5100 Westheimer, Ste. 580 Houston, TX 77056		
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC Stewart & Stevenson	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 8631 East Freeway Houston, TX 77029		
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor <input type="checkbox"/> out of state PAC Turner, Collie & Braden, Inc.	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code PO Box 130089 Houston, TX 77219		
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
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SCHEDULE C
(FOR FORMS C/OH & SPAC)

The Instruction Guide explains how to complete this form.			Total pages this Schedule : 6
FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 10-31-2001	Full name of contributor Hicks & Company <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 1504 West 5th St. Austin, T X 78703	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 10-31-2001	Full name of contributor Kirksey <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 6909 Portwest Drive Houston, TX 77024	Amount of contribution (\$) \$150.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Transit Center Development Management Team <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Camden Property Trust <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 3 Greenway Plaza, Ste. 1300 Houston, TX 77046-0391	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Brooks & Sparks, Inc. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 15915 Katy Freeway Houston, TX 77094	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-1-2001	Full name of contributor Brian Smith Construction Inspection, Inc. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 1802 Calumet Houston, TX 77004	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE C
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FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 11-2-2001	Full name of contributor Houston Astros Baseball Club <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code PO Box 288 Houston, TX 77001	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-2-2001	Full name of contributor HNTB Corporation <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 100 Glenbrough Dr., Ste 1300 Houston, TX 77067	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-2-2001	Full name of contributor DMJM + Harris <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 5757 Woodway, 2nd Fl. Houston, TX 77057	Amount of contribution (\$) \$6,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-2-2001	Full name of contributor First Transit <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code One Centennial Plaza, 705 Central Avenue, Ste Cincinnati, OH 45202	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-2-2001	Full name of contributor Motor Coach Industries <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 10 East Golf Road Des Plaines, IL 60016	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-5-2001	Full name of contributor Terra-Mar, Inc. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 11050 Albes Ln. Dallas, TX 75229	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE C
(FOR FORMS C/OH & SPAC)

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FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission files)
Date 11-5-2001	Full name of contributor Arcadis G&M <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 11490 Westheimer, Ste. 600 Houston, TX 77077	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-5-2001	Full name of contributor PBS&J <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 1880 S. Dairy Ashford, Ste. 300 Houston, TX 77077	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-5-2001	Full name of contributor Contractor Technology Inc. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 1302 Cordell St. Houston, TX 77009	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-5-2001	Full name of contributor Dannenbaum Engineering Corp. <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 3100 W. Alabama Houston, TX 77098	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-6-2001	Full name of contributor Ocean Energy Incorporated <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 1001 Fannin, Ste. 1600 Houston, TX 77002-6794	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	
Date 11-6-2001	Full name of contributor Montgomery Watson <input type="checkbox"/> out of state PAC Contributor address; City; State; Zip Code 5100 Westheimer, Ste. 580 Houston, TX 77056	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE C
(FOR FORMS C/OH & SPAC)

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FILER NAME: Houstonians for Mobility			ACCOUNT # (Ethics Commission filers)
Date 11-7-2001	Full name of contributor <input type="checkbox"/> out of state PAC Parsons Brinckerhoff Quade & Douglas, Inc.	Amount of contribution (\$) \$10,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 2500 City West Blvd., Ste 275 Houston, TX 77042		
Principal occupation (Optional)		Employer (Optional)	
Date 11-20-2001	Full name of contributor <input type="checkbox"/> out of state PAC JP Morgan Chase	Amount of contribution (\$) \$25,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code PO Box 2558 Houston, TX 77252-8053		
Principal occupation (Optional)		Employer (Optional)	
Date 11-20-2001	Full name of contributor <input type="checkbox"/> out of state PAC Bank of America	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 700 Louisiana Houston, TX 77002		
Principal occupation (Optional)		Employer (Optional)	
Date 11-23-2001	Full name of contributor <input type="checkbox"/> out of state PAC Landry's Restaurants, Inc.	Amount of contribution (\$) \$7,500.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 1510 West Loop South Houston, TX 77027		
Principal occupation (Optional)		Employer (Optional)	
Date 12-5-2001	Full name of contributor <input type="checkbox"/> out of state PAC Exxon Mobil Corporation	Amount of contribution (\$) \$25,000.00	In-kind contribution description (if available)
	Contributor address; City; State; Zip Code 1005 Congress Ave., Ste. 900 Austin, TX 78701		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 10-29-2001	Payee name Dave Walden 55 Waugh Dr., Ste. 610 Houston, TX 77007	Payee address	Amount (\$) \$2,036.00
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for campaign travel expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-29-2001	Payee name Kight Printing 5750 Bintliff, Ste. 202 Houston, TX 77036	Payee address	Amount (\$) \$10,232.08
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-30-2001	Payee name Phil Owens 7700 Willowchase Houston, TX 77070	Payee address	Amount (\$) \$1,500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-30-2001	Payee name Booker Industries 5415 Maple Ave., Ste. 230 Dallas, TX 75235	Payee address	Amount (\$) \$1,800.00
Purpose of expenditure (See instructions regarding type of information required.) Lists		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-30-2001	Payee name Progressive Voters in Action P.O. Box 667307 Houston, TX 77266	Payee address	Amount (\$) \$5,000.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 10-30-2001	Payee name Amy Pierce 4420 Effie Houston, TX 77005	Payee address	Amount (\$) \$6,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-31-2001	Payee name Texas Printing 4715 Main Houston, TX 77002	Payee address	Amount (\$) \$270.63
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-31-2001	Payee name Texas Printing 4715 Main Street Houston, TX 77002	Payee address	Amount (\$) \$486.76
Purpose of expenditure (See instructions regarding type of information required.) Printing.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-31-2001	Payee name Texas Printing 4715 Main Houston, TX 77002	Payee address	Amount (\$) \$1,894.38
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 10-31-2001	Payee name Kathryn McNiel PO Box 131835 Houston, TX 77219	Payee address	Amount (\$) \$2,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 10-31-2001	Payee name Payee address Texas Printing 4715 Main Street Houston, TX 77002	Amount (\$) \$2,976.88
Purpose of expenditure (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date 11-1-2001	Payee name Payee address Trademarks 11333 Todd Street Houston, TX 77055	Amount (\$) \$917.90
Purpose of expenditure (See instructions regarding type of information required.) Campaign materials		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date 11-1-2001	Payee name Payee address Ella Schubert 11250 Briar Forest, No. 106 Houston, TX 77042	Amount (\$) \$2,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date 11-1-2001	Payee name Payee address Kim Jessup 14027 Memorial, Ste. 338 Houston, TX 77079	Amount (\$) \$5,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date 11-1-2001	Payee name Payee address Sue Walden & Associates 55 Waugh Dr., Ste. 610 Houston, TX 77007	Amount (\$) \$10,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee and fundraising services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 11-1-2001	Payee name Matthew Emal PO Box 230146 Houston, TX 77223	Payee address	Amount (\$) \$10,000.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-1-2001	Payee name Campaign Strategies 515 Post Oak Blvd., Ste. 120 Houston, TX 77027	Payee address	Amount (\$) \$46,996.35
Purpose of expenditure (See instructions regarding type of information required.) Direct mail expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Justin McDewitt 15484 Cardinal Conroe, TX 77302	Payee address	Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Michael Dean 1010 Old Mill Lane Houston, TX 77073	Payee address	Amount (\$) \$150.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name First Assembly of God of Spring 1851 Spring Cypress Spring, TX 77388	Payee address	Amount (\$) \$200.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 11-2-2001	Payee name Spring Woods Choral 2045 N. Gessner Houston, TX 77080	Payee address	Amount (\$) \$200.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Intervarsity Christian 1 Main, Ste. 2805 Houston, TX 77072	Payee address	Amount (\$) \$250.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Peggy Dean 1010 Old Mill Lane Houston, TX 77073	Payee address	Amount (\$) \$450.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Jeff Crook 7700 Willowchase Houston, TX 77070	Payee address	Amount (\$) \$500.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Mike Welborn 10225 Wortham Blvd. Houston, TX 77065	Payee address	Amount (\$) \$700.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 11-2-2001	Payee name Phil Owens 7700 Willowchase Houston, TX 77070	Payee address	Amount (\$) \$5,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-2-2001	Payee name Politico 5303 Lyons Houston, TX 77070	Payee address	Amount (\$) \$27,500.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-4-2001	Payee name Campaign Strategies 515 Post Oak Blvd., Ste. 120 Houston, TX 77027	Payee address	Amount (\$) \$112,645.60
Purpose of expenditure (See instructions regarding type of information required.) Phone bank expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-5-2001	Payee name Phil Owens 7700 Willowchase Houston, TX 77070	Payee address	Amount (\$) \$2,204.34
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for yardsigns and campaign expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-5-2001	Payee name Progressive Voters in Action PO Box 667307 Houston, TX 77266	Payee address	Amount (\$) \$2,500.00
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form:	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 11-5-2001	Payee name Texas Printing 4715 Main Street Houston, TX 77002	Payee address	Amount (\$) \$4,557.76
Purpose of expenditure (See instructions regarding type of information required.) Printing.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-6-2001	Payee name Floral Events 3118 Houston Ave. Houston, TX 77009	Payee address	Amount (\$) \$171.04
Purpose of expenditure (See instructions regarding type of information required.) Event expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-6-2001	Payee name Career Placement 4444 Richmond Ave. Houston, TX 77027	Payee address	Amount (\$) \$891.07
Purpose of expenditure (See instructions regarding type of information required.) Contract labor		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-6-2001	Payee name Campaign Strategies 515 Post Oak Blvd., Ste. 120 Houston, TX 77027	Payee address	Amount (\$) \$3,655.88
Purpose of expenditure (See instructions regarding type of information required.) GOTV efforts		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-6-2001	Payee name Hyatt Regency Hotel 1200 Louisiana Houston, TX 77002	Payee address	Amount (\$) \$5,238.39
Purpose of expenditure (See instructions regarding type of information required.) Event expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date 11-6-2001	Payee name Campos Communications 816 Ralfallen Houston, TX 77008	Payee address	Amount (\$) \$7,500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-6-2001	Payee name Campaign Strategies 515 Post Oak Blvd., Ste. 120 Houston, TX 77027	Payee address	Amount (\$) \$30,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-8-2001	Payee name Politico 5303 Lyons Houston, TX 77070	Payee address	Amount (\$) \$1,500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-9-2001	Payee name Texas Printing 4715 Main Street Houston, TX 77002	Payee address	Amount (\$) \$237.00
Purpose of expenditure (See instructions regarding type of information required.) Printing.		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

Date 11-9-2001	Payee name Phil Owens 7700 Willowchase Houston, TX 77070	Payee address	Amount (\$) \$143.82
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for campaign expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date	Payee name	Payee address	Amount (\$)
11-9-2001	AP Graphics	2411 Times Blvd., Ste. 130 Houston, TX 77005	\$437.87
Purpose of expenditure (See instructions regarding type of information required.) Copies			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date	Payee name	Payee address	Amount (\$)
11-13-2001	Dave Walden	55 Waugh Dr., Ste. 610 Houston, TX 77007	\$2,796.00
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for campaign expenses			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date	Payee name	Payee address	Amount (\$)
11-13-2001	Dave Walden	55 Waugh Dr., Ste. 610 Houston, TX 77007	\$5,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date	Payee name	Payee address	Amount (\$)
11-20-2001	Campaign Strategies	515 Post Oak Blvd., Ste. 120 Houston, TX 77027	\$30,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

Date	Payee name	Payee address	Amount (\$)
11-30-2001	Sue Walden & Associates	55 Waugh Dr., Ste. 610 Houston, TX 77007	\$10,000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee and fundraising services			** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	Total pages Schedule F: 10
FILER NAME: Houstonians for Mobility	ACCOUNT #: (Ethics Commission filers)

Date	Payee name	Payee address	Amount (\$)
12-12-2001	Ella Schubert	11250 Briar Forest, No. 106 Houston, TX 77042	\$2,500.00
Purpose of expenditure (See instructions regarding type of information required.)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	
Consulting fee			