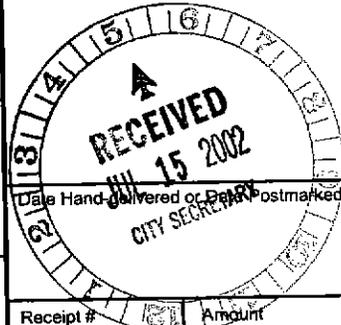


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 Total pages this report: 1/47
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Gordon NICKNAME LAST SUFFIX Quan	OFFICE USE ONLY Date Received  Date Hand-Delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 2405 Houston TX 77252-2405		
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Mike NICKNAME LAST SUFFIX Garver		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5402 Lawndale Houston TX 77023		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () -		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2002 THROUGH 06/30/2002		
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) <i>Council Member At-Large Pcs. 2</i>		12 OFFICE SOUGHT (if known)
13 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

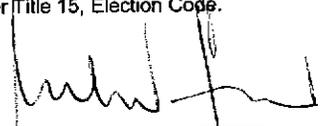
FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Gordon Quan	15 ACCOUNT # (Ethics Commission filers) 00000001																
16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..																
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">COMMITTEE TYPE</td> <td style="padding: 2px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 2px;">COMMITTEE ADDRESS</td> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> <td style="padding: 2px;"> </td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS											
COMMITTEE TYPE	COMMITTEE NAME																
COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME																
COMMITTEE CAMPAIGN TREASURER ADDRESS																	
17 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.)																	
18 CONTRIBUTION TOTALS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</td> <td style="width:50%; text-align: right;">\$ 0.00</td> </tr> <tr> <td>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td> <td style="text-align: right;">\$ 52715.00</td> </tr> <tr> <td style="padding-top: 10px;">EXPENDITURE TOTALS</td> <td style="padding-top: 10px;">3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ 238.66</td> </tr> <tr> <td></td> <td style="text-align: right;">4. TOTAL POLITICAL EXPENDITURES</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ 44,620.87</td> </tr> <tr> <td style="padding-top: 10px;">OUTSTANDING LOAN TOTALS</td> <td style="padding-top: 10px;">5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> </table>	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)	\$ 52715.00	EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$ 238.66		4. TOTAL POLITICAL EXPENDITURES		\$ 44,620.87	OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00
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)	\$ 52715.00																
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED																
	\$ 238.66																
	4. TOTAL POLITICAL EXPENDITURES																
	\$ 44,620.87																
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD																
	\$ 0.00																

19 AFFIDAVIT

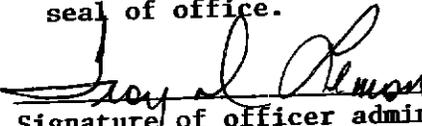


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said GORDON QUAN, this the 15th day of July, 2002, to certify which, witness my hand and seal of office.



 Signature of officer administering oath

Printed Name of Gordon Quan Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 40/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 01/23/2002	5 Payee name Morrison Design <hr/> 6 Payee address; City; State; Zip Code 1113 Vine St.,Studio 110 Houston TX 77002	7 Amount (\$) 398.36
8 Purpose of expenditure (See instructions regarding type of information required.) Printing Christmas cards & inaugural cards		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/25/2002	Payee name Morrison Design <hr/> Payee address; City; State; Zip Code 1113 Vine St.,Studio 110 Houston TX 77002	Amount (\$) 2002.63
Purpose of expenditure (See instructions regarding type of information required.) Invitation printing		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2002	Payee name Muscular Dystrophy Assoc. <hr/> Payee address; City; State; Zip Code P.O.Box 272243 Houston TX 77277-2243	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Patti Joiner		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/18/2002	Payee name NP Services <hr/> Payee address; City; State; Zip Code P. O. Box 2706 Houston TX 77252-2706	Amount (\$) 1500.00
Purpose of expenditure (See instructions regarding type of information required.) Mailing and Postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission files) 0000000x	
4 Date 01/31/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ansun PAC 6 Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Peter & Alice Arbour Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Laura F Bachman Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael J Bagstad Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/01/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vishwa M Bahl Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report 4/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Oussama Barbar 6 Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pete Barsales Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Larry Berkman Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Victor Bhatt Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Andrew P Biar Contributor address; City; State; Zip Code [REDACTED] [REDACTED]	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mark Boyer	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bracewell & Patterson Committee	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gerald M Brady	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lewis S Brogan	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 01/31/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ronald G Brookfield	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 6/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Harlon & Alfredie Brooks	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 01/31/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CDMPAC	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CDMPAC	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marc A Campos	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Darryl B Carter	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report 7/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ke & Patty Lan Chen	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Faye Chin	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Y Chou	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William H Clements	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cindy L Clifford	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 8/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Coats, Rose PAC 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kelley D Cobb Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lyon D Cohen Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Salvador Colon Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Colton Development Co. Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 9/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission files) 0000000x	
4 Date 01/31/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martha Cottingham	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brian P Cweren	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James D Dannenbaum	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tieman H Dippel, Jr	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ovide Duncantell	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 10/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alexander Filipovich 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 200.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William D Fong Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James W Fonteno Jr. Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barry L Frager Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Twilight Freedman Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 11/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fulbright & Jawarski,LLP	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) C.M. Garver	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) George Gee	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 01/31/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Howard C Gee	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John M Gonzalez	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 12/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Grande Communications Networks Inc. PAC 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hermes Reed Architects PAC Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Beng T Ho Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) J. D. Hong Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chsun-Yi Don Hsu Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 13/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gary J Ilagan 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 150.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James R Jard Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patricia K Joiner Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ricky Kamins Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martha E Kaplan Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 14/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 01/31/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Matthew S Khourie	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hemachandra Prasad Kolluru	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paul P Kwan	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Eugene C Lai	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) George Lee	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 15/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mark Lee	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ann Lents	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Raymond Lew	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kuo Chiang Lin	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lola F Lin	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 16/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linebarger Goggan Blair Pena & Sampson,LLP	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Locke Liddell & Sapp,LLP	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Priscilla H Lou	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert Low-Thue	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Herbert Lum	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 17/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/28/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Maass 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 01/31/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Madison Woo Insurance Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Annie & Shu H Mak Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rikib M Memon Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Gregg Middleton Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 18/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David M Mincberg 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael Louis Minns Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sherif Mohamed Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Daniel Nip Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lois O'Connor Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 19/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shin Shem Pei 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bob J Perry Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Doylene Perry Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Planned Parenthood of Houston SE Texas Action Fund PAC Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Irene M Porcarello Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 20/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 03/01/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Balwanthrao Ratnala	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/04/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reddy-York Plaza	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nestor & Jamil Rosial	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mary Comeaux-Taylor Ross	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wei-Chan Shih	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 21/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission files) 0000000x	
4 Date 02/25/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William Y Sim	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) George Strong	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mustafa I Tameez	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kefelegne Tesfaye	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Texas Coalition for Good Government	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 22/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Charlotte Tieh	7 Amount of contribution (\$) 300.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code [REDACTED]		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Andrew Tran	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vonn Tran	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation (Optional)		Employer (Optional)	
Date 02/28/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Union Pacific Corporation Fund for Effective Government	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) V. N. Vijayvergiya	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 23/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vinson & Elkins Texas PAC 6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jatinbhai Vinubhai Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lance Weaver Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Richard W Weekley Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Karin R Werness Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 24/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 02/26/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) R.E. Wheelen	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code [REDACTED]			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Winstead Sechrest & Minick PAC	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Daniel Wong	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Richard J Wong	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Susannah Wong	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code [REDACTED]			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 25/47	
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x	
4 Date 03/01/2002	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Yongshu Yang 6 Contributor address: City; State; Zip Code [REDACTED]	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 02/26/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patsy P Yung Contributor address: City; State; Zip Code [REDACTED]	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2002	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paul P Zanowiak Contributor address: City; State; Zip Code [REDACTED]	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 26/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 05/14/2002	5 Payee name Waldemar's 6 Payee address; City; State; Zip Code 1625 W. Alabama Houston TX 77006	7 Amount (\$) 65.00
8 Purpose of expenditure (See instructions regarding type of information required.) Fruit basket for Ms. Tieh		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/03/2002	Payee name AIDS Foundation Houston Payee address; City; State; Zip Code Hobby Center for the Performing Arts 800 Bagby at Walker Houston TX 77002	Amount (\$) 200.00
Purpose of expenditure (See instructions regarding type of information required.) Donation		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2002	Payee name Andrew Tran Campaign Payee address; City; State; Zip Code P.O. Box 44147 Houston TX 77244-1417	Amount (\$) 2000.00
Purpose of expenditure (See instructions regarding type of information required.) Campaign contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/12/2002	Payee name Yemi Ayodele Payee address; City; State; Zip Code 11415 Pagoda Stafford TX 77477	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Youth Leadership Forum or Funto Ayodeli		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 Total pages report: 27/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 01/23/2002	5 Payee name BFM Printing Co. 6 Payee address; City; State; Zip Code P. O. Box 27014 Houston TX 77277	7 Amount (\$) 741.51
8 Purpose of expenditure (See instructions regarding type of information required.) Printing post cards		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/26/2002	Payee name Bombay Palace Payee address; City; State; Zip Code 4100 Westheimer Houston TX 77027	Amount (\$) 439.67
Purpose of expenditure (See instructions regarding type of information required.) Reception		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/13/2002	Payee name Boy Scout Troop 212 Payee address; City; State; Zip Code St. James Episcopal church 3129 Southmore Blvd Houston TX 77004	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Donation		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/20/2002	Payee name Buffalo Bayou Partnership Payee address; City; State; Zip Code 1111 Bagby Houston TX 77002	Amount (\$) 1250.00
Purpose of expenditure (See instructions regarding type of information required.) Dragon Boat Festival		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 Total pages report: 28/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 04/10/2002	5 Payee name Jeri Bui 6 Payee address; City; State; Zip Code Houston TX	7 Amount (\$) 148.50
8 Purpose of expenditure (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 02/04/2002	Payee name Rogene Gee Calvert Payee address; City; State; Zip Code 4122 Woodhaven Houston TX 77025	Amount (\$) 90.00
Purpose of expenditure (See instructions regarding type of information required.) Reimburse 3 months- Nov.-Jan Cell Phone expense		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/06/2002	Payee name Rogene Gee Calvert Payee address; City; State; Zip Code 4122 Woodhaven Houston TX 77025	Amount (\$) 84.39
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for miscellaneous items		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/12/2002	Payee name Rogene Gee Calvert Payee address; City; State; Zip Code 4122 Woodhaven Houston TX 77025	Amount (\$) 189.20
Purpose of expenditure (See instructions regarding type of information required.) Reimbursement for office expenses		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 Total pages report: 29/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 01/17/2002	5 Payee name Canton Seafood Restaurant 6 Payee address; City; State; Zip Code 2649 Richmond Ave. Houston TX 77098	7 Amount (\$) 306.90
8 Purpose of expenditure (See instructions regarding type of information required.) Tony Sanchez Campaign		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/12/2002	Payee name Chinatown Printing & Graphics Payee address; City; State; Zip Code 2012 Leeland Street Houston TX 77003	Amount (\$) 151.55
Purpose of expenditure (See instructions regarding type of information required.) Business Cards		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/22/2002	Payee name Daniel Wong Campaign Payee address; City; State; Zip Code 10710 South Sam Houston Parkway West,Suite 100 Houston TX 77031	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) Contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/04/2002	Payee name David Wu Campaign Payee address; City; State; Zip Code Galleria,Sutie 208A,921 SW Morrison St. Portland OR 97205	Amount (\$) 260.50
Purpose of expenditure (See instructions regarding type of information required.) Campaign contribution		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 Total pages report: 30/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 01/30/2002	5 Payee name Karen L DeSantis 6 Payee address; City; State; Zip Code 1699 Romano Park Lane,#470 Houston TX 77090	7 Amount (\$) 250.00
8 Purpose of expenditure (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 02/27/2002	Payee name Karen L DeSantis Payee address; City; State; Zip Code 1699 Romano Park Lane,#470 Houston TX 77090	Amount (\$) 250.00
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 Office held
Date 04/01/2002	Payee name Karen L DeSantis Payee address; City; State; Zip Code 1699 Romano Park Lane,#470 Houston TX 77090	Amount (\$) 250.00
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 Office held
Date 02/26/2002	Payee name Dong Ting Payee address; City; State; Zip Code 611 Stuart Houston TX 77006	Amount (\$) 1770.08
Purpose of expenditure (See instructions regarding type of information required.) Fundraiser food & beverage		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 Total pages report: 31/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 02/06/2002	5 Payee name Dora Olivo Campaign 6 Payee address; City; State; Zip Code 816 Ralfallen Houston TX 77008	7 Amount (\$) 50.00
8 Purpose of expenditure (See instructions regarding type of information required.) Fundraising Reception for State Rep		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/07/2002	Payee name Felicia Ferrar Campaign Payee address; City; State; Zip Code P.O. Box 2314 Stafford TX 77489	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Re-election		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 (\$)
Purpose of expenditure (See instructions regarding type of information required.) Purchase CD		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/19/2002	Payee name Friends of Mazie Hironaka HIRANO Payee address; City; State; Zip Code P.O Box 677 Honolulu HI 96809	Amount (\$) 250.00
Purpose of expenditure (See instructions regarding type of information required.) Campaign Contribution		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 Total pages report:
32/47

2 FILER NAME
Gordon Quan

3 ACCOUNT # (Ethics Commission filers)
0000000x

4 Date
05/29/2002

5 Payee name
G.H.C.V.B

7 Amount
(\$)
64.95

6 Payee address; City; State; Zip Code
901 Bagby
Houston TX 77002

8 Purpose of expenditure (See instructions regarding type of information required.)
Parting Gifts for CG of Mexico and Peru

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

Date
03/27/2002

Payee name
Grant Martin Consulting

Amount
(\$)
739.72

Payee address; City; State; Zip Code
P. O. Box 667307
Houston TX 77266-7307

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

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

Date
02/11/2002

Payee name
HACH

Amount
(\$)
522.50

Payee address; City; State; Zip Code
2640 Fountain View
Houston TX 77057

Purpose of expenditure (See instructions regarding type of information required.)
Back Rent for Tenant

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

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 33/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 02/25/2002	5 Payee name Indo-American News 6 Payee address; City; State; Zip Code 7457 Harwin Dr., Suite 262 Houston TX 77036	7 Amount (\$) 60.00
8 Purpose of expenditure (See instructions regarding type of information required.) New year's ad		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/12/2002	Payee name JP Morgan Chase Bank of Texas Payee address; City; State; Zip Code P. O. Box 2558 Houston TX 77252-2558	Amount (\$) 360.04
Purpose of expenditure (See instructions regarding type of information required.) Deposit Form 1120-POL 2001 tax liability		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/05/2002	Payee name Jessica Farrar Campaign Payee address; City; State; Zip Code P.O Box 2314 Stafford TX 77497-2314	Amount (\$) 50.00
Purpose of expenditure (See instructions regarding type of information required.) Campaign Contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/31/2002	Payee name Jewish Herald Voice Payee address; City; State; Zip Code 3403 Audley Houston TX 77098	Amount (\$) 370.00
Purpose of expenditure (See instructions regarding type of information required.) Passover ad		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 Total pages report: 34/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 02/05/2002	5 Payee name Joe Moreno Campaign 6 Payee address; City; State; Zip Code 6925 Abilben Houston TX 77020	7 Amount (\$) 50.00
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Contribution		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2002	Payee name Daniel Josh Payee address; City; State; Zip Code 1 Cougar Place Dr., Apt. 105 Houston TX 77004	Amount (\$) 240.00
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 Office held
Date 05/20/2002	Payee name Daniel Josh Payee address; City; State; Zip Code 1 Cougar Place Dr., Apt. 105 Houston TX 77004	Amount (\$) 410.00
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 Office held
Date 05/28/2002	Payee name Daniel Josh Payee address; City; State; Zip Code 1 Cougar Place Dr., Apt. 105 Houston TX 77004	Amount (\$) 500.00
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 Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 35/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 04/03/2002	5 Payee name Kid care 6 Payee address; City; State; Zip Code 4504 Old Yale Houston TX 77018	7 Amount (\$) 90.00
8 Purpose of expenditure (See instructions regarding type of information required.) Lunch for Meeting		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/07/2002	Payee name Kingwood Screen Graphics Payee address; City; State; Zip Code 1615 Lakeville Dr. Suite A Kingwood TX 77339	Amount (\$) 208.84
Purpose of expenditure (See instructions regarding type of information required.) T-SHIRTS / Partial Payment		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/06/2002	Payee name Kingwood Screen Graphics Payee address; City; State; Zip Code 1615 Lakeville Dr. Suite A Kingwood TX 77339	Amount (\$) 343.46
Purpose of expenditure (See instructions regarding type of information required.) Balance of Y-Cep T-Shirts		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/06/2002	Payee name LULAC Dist. VIII Payee address; City; State; Zip Code 2900 Woodridge Houston TX 77087	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Cinco de Mayo Parade		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 Total pages report: 38/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 04/04/2002	5 Payee name Martin Luther King Jr. Center 6 Payee address; City; State; Zip Code 2720 Sampson Houston TX 77004	7 Amount (\$) 100.00
8 Purpose of expenditure (See instructions regarding type of information required.) Two tickets for 34th anniversary		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/04/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 517.35
Purpose of expenditure (See instructions regarding type of information required.) Reimburse campaign expenses - postage,water,beve - rages,supplies		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/30/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 1500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - January		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/27/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 4000.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - February		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 Total pages report: 39/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 04/01/2002	5 Payee name Kathryn C McNiel 6 Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	7 Amount (\$) 1500.00
8 Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - March		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/02/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 1768.54
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - April & reimbursement of campaign - expenses		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/31/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 1500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - May		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/28/2002	Payee name Kathryn C McNiel Payee address; City; State; Zip Code P. O. Box 131835 Houston TX 77219	Amount (\$) 1500.00
Purpose of expenditure (See instructions regarding type of information required.) Consulting fee - June		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 Total pages report: 41/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 03/27/2002	5 Payee name NP Services 6 Payee address; City; State; Zip Code P. O. Box 2706 Houston TX 77252-2706	7 Amount (\$) 844.41
8 Purpose of expenditure (See instructions regarding type of information required.) Bal. Due on invitation mailout		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/10/2002	Payee name NP Services Payee address; City; State; Zip Code P. O. Box 2706 Houston TX 77252-2706	Amount (\$) 423.13
Purpose of expenditure (See instructions regarding type of information required.) Mailing & postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/07/2002	Payee name National League of Cities Payee address; City; State; Zip Code Washington DC	Amount (\$) 427.00
Purpose of expenditure (See instructions regarding type of information required.) Conference registration		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/30/2002	Payee name Quan,Burdette,Perez,PC Payee address; City; State; Zip Code 5177 Richmond Ave.,Suite 800 Houston TX 77056	Amount (\$) 122.60
Purpose of expenditure (See instructions regarding type of information required.) Reimburse postage & copies expenses		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 Total pages report: 44/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 03/27/2002	5 Payee name TanChes Global Management, Inc. 6 Payee address; City; State; Zip Code 2411 Fountainview Dr., Suite 111 Houston TX 77057	7 Amount (\$) 27.06
8 Purpose of expenditure (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 06/28/2002	Payee name TanChes Global Management, Inc. Payee address; City; State; Zip Code 2411 Fountainview Dr., Suite 111 Houston TX 77057	Amount (\$) 108.25
Purpose of expenditure (See instructions regarding type of information required.) Web site hosting fee April - July		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/06/2002	Payee name Tejano Center for Community Concerns Payee address; City; State; Zip Code 2950 Broadway Houston TX 77017	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Annual Golf Tournament May 2		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/26/2002	Payee name The Old Timers Club Payee address; City; State; Zip Code P.O.Box 4185 Houston TX 77210	Amount (\$) 100.00
Purpose of expenditure (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 Total pages report: 45/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 05/14/2002	5 Payee name Charlotte Tieh <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 4006 Betsy Lane Houston TX 77027	7 Amount (\$) 510.15
8 Purpose of expenditure (See instructions regarding type of information required.) Ms. Sr. Texas Expenses		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/07/2002	Payee name Travel Redemption Center <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code P. O. Box 15070 Wilmington DE 19850-5070	Amount (\$) 359.00
Purpose of expenditure (See instructions regarding type of information required.) Conference travel for Mark Adams		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/03/2002	Payee name United Way Project Blueprint <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code 2200 N. Loop West Houston TX 77018	Amount (\$) 360.00
Purpose of expenditure (See instructions regarding type of information required.) Commitment to Leadership Dinner		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/22/2002	Payee name University Area Rotary Club <hr style="border-top: 1px dotted black;"/> 6 Payee address; City; State; Zip Code Houston TX	Amount (\$) 250.00
Purpose of expenditure (See instructions regarding type of information required.) Tampico Project		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 Total pages report: 36/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 03/06/2002	5 Payee name Labor Council for Latin American Advancement 6 Payee address; City; State; Zip Code 2506 Sutherland Houston TX 77023	7 Amount (\$) 50.00
8 Purpose of expenditure (See instructions regarding type of information required.) Annual Scholarship Brochure Ad Purchase		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/22/2002	Payee name Lake Houston Pachyderm Club Payee address; City; State; Zip Code 1301 Missetow Kingwood TX 77339	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Purchase Table		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/04/2002	Payee name Lamar Theatre Payee address; City; State; Zip Code 3325 Westheimer Houston TX 77098	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Susannah Cunningham Play		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2002	Payee name Leadership Houston Payee address; City; State; Zip Code 3015 Richmond,Ste 250 Houston TX 77098	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Monument Brick		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 Total pages report: 37/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 03/24/2002	5 Payee name Lee Brown Campaign 6 Payee address; City; State; Zip Code P.O.Box 540143 Houston TX 77254	7 Amount (\$) 1000.00
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign contribution		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/26/2002	Payee name Lee's Dragon Dancers Payee address; City; State; Zip Code Houston TX	Amount (\$) 200.00
Purpose of expenditure (See instructions regarding type of information required.) Fundraiser entertainment		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/23/2002	Payee name Mail Boxes Etc. #1719 Payee address; City; State; Zip Code 5090 Richmond Avenue Houston TX 77056	Amount (\$) 252.00
Purpose of expenditure (See instructions regarding type of information required.) P.O. box rental - one year		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/24/2002	Payee name Martha Wong Campaign Payee address; City; State; Zip Code 3917 Richmond Houston TX 77027	Amount (\$) 5000.00
Purpose of expenditure (See instructions regarding type of information required.) Campaign contribution		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 Total pages report: 46/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 06/11/2002	5 Payee name Vietnamese Community Houston 6 Payee address; City; State; Zip Code c/o Kim Nguyen, President MetLife 800 Gessner, Ste. 1150 Houston TX 77024	7 Amount (\$) 200.00
8 Purpose of expenditure (See instructions regarding type of information required.) Contribution		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/05/2002	Payee name Wesley Chapel AME Church Payee address; City; State; Zip Code 2209 Dowling Houston TX 77004	Amount (\$) 150.00
Purpose of expenditure (See instructions regarding type of information required.) Contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/03/2002	Payee name Phillip Yates Payee address; City; State; Zip Code Stephen F. Austin Univ., P.O.Box 14378, Nacogdoches, TX 75962 Nacogdoches TX 75962	Amount (\$) 231.00
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 Office held
Date 06/11/2002	Payee name Phillip Yates Payee address; City; State; Zip Code Stephen F. Austin Univ., P.O.Box 14378, Nacogdoches, TX 75962 Nacogdoches TX 75962	Amount (\$) 245.00
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 Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 47/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 06/18/2002	5 Payee name Phillip Yates 6 Payee address; City; State; Zip Code Stephen F. Austin Univ., P.O.Box 14378, Nacogdoches, TX 75962 Nacogdoches TX 75962	7 Amount (\$) 224.00
8 Purpose of expenditure (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 06/28/2002	Payee name Phillip Yates Payee address; City; State; Zip Code Stephen F. Austin Univ., P.O.Box 14378, Nacogdoches, TX 75962 Nacogdoches TX 75962	Amount (\$) 490.00
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 Office held
Date 05/14/2002	Payee name Youth Leadership Conference Payee address; City; State; Zip Code P.O. Box 890064 Houston TX 77289-0064	Amount (\$) 625.00
Purpose of expenditure (See instructions regarding type of information required.) Table and auction		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 Total pages report: 42/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 05/31/2002	5 Payee name Quan,Burdette,Perez,PC	7 Amount (\$) 113.14
6 Payee address; City; State; Zip Code 5177 Richmond Ave.,Suite 800 Houston TX 77056		
8 Purpose of expenditure (See instructions regarding type of information required.) Reimburse postage & copies expenses		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/11/2002	Payee name Rice University	Amount (\$) 249.16
Payee address; City; State; Zip Code 5620 Main, Suite 200 Houston TX 77005		
Purpose of expenditure (See instructions regarding type of information required.) 2002 Houston Area Asian Survey Luncheon		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/26/2002	Payee name Ron Kirk for U.S. Senate	Amount (\$) 1000.00
Payee address; City; State; Zip Code P.O. Box 720160 Dallas TX 75372		
Purpose of expenditure (See instructions regarding type of information required.) Campaign contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/14/2002	Payee name	Amount (\$)
Payee address; City; State; Zip Code Houston TX 77030		
Purpose of expenditure (See instructions regarding type of information required.) Mother's Day Contribution		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 Total pages report: 43/47
2 FILER NAME Gordon Quan		3 ACCOUNT # (Ethics Commission filers) 0000000x
4 Date 05/24/2002	5 Payee name Southeast Coalition Civic Clubs 6 Payee address; City; State; Zip Code Southeast Police Storefront,3511 Reed Rd. Houston TX 77051	7 Amount (\$) 100.00
8 Purpose of expenditure (See instructions regarding type of information required.) Contribution for SE American Red Cross Gala		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/18/2002	Payee name TMJ Enterprises Payee address; City; State; Zip Code P.O. Box 720391 Houston TX 77272	Amount (\$) 123.50
Purpose of expenditure (See instructions regarding type of information required.) 60 City Houston Pins - YCEP		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 01/23/2002	Payee name TanChes Global Management,Inc. Payee address; City; State; Zip Code 2411 Fountainview Dr.,Suite 111 Houston TX 77057	Amount (\$) 27.06
Purpose of expenditure (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
Date 01/30/2002	Payee name TanChes Global Management,Inc. Payee address; City; State; Zip Code 2411 Fountainview Dr.,Suite 111 Houston TX 77057	Amount (\$) 27.06
Purpose of expenditure (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