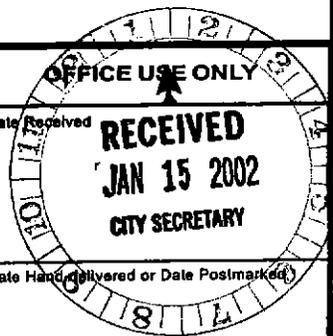


# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission filers)	<b>2 Total pages filed:</b>
<b>3 COMMITTEE NAME</b> Houstonians for Quality Government			
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 131835 Houston, Tx 77219		
<b>5 CAMPAIGN TREASURER NAME</b>	TITLE FIRST MI C. M. Garver NICKNAME LAST SUFFIX		Receipt # Amount Date Processed Date Imaged
<b>6 CAMPAIGN TREASURER'S STREET ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5402 Lawndale Houston, Tx 77023		
<b>7 CAMPAIGN TREASURER'S MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (713) 921-2929 xt 20		
<b>9 REPORT TYPE</b>	<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 PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
<b>10 PERIOD COVERED</b>	Month Day Year                      Month Day Year 10 / 9 / 01                      THROUGH                      01 / 15 / 02		
<b>11 ELECTION</b>	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input 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 Quality Government ACCOUNT # (Ethics Commission filers)

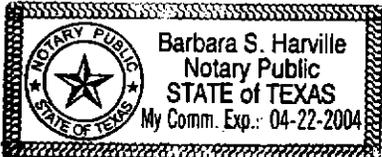
<p>13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)</p> <p><input type="checkbox"/> SUPPORT</p> <p><input type="checkbox"/> OPPOSE</p> <p><input type="checkbox"/> ASSIST (officeholders only)</p>	<p><input type="checkbox"/> CANDIDATE</p>	CANDIDATE / OFFICEHOLDER NAME
	<p><input type="checkbox"/> OFFICEHOLDER</p>	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
	<p><input type="checkbox"/> MEASURE</p>	<p>BALLOT IDENTIFICATION / #</p> <p style="text-align: right;">ELECTION DATE Month Day Year / /</p>
		DESCRIPTION

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

<p>15 CONTRIBUTION TOTALS</p> <p>EXPENDITURE TOTALS</p> <p>OUTSTANDING LOAN TOTALS</p>	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)	\$ —
	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ —
	4. TOTAL POLITICAL EXPENDITURES	\$ —
	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.



AFFIX NOTARY STAMP / SEAL ABOVE

Kathryn McNeil

Signature of campaign treasurer

Sworn to and subscribed before me, by the said Kathryn McNeil this the 15<sup>th</sup> day of January, 2002, to certify which, witness my hand and seal of office.

Barbara S. Harville

Signature of officer administering oath

BARBARA S. HARVILLE

Printed name of officer administering oath

NOTARY PUBLIC

Title of officer administering oath