

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 PAGE # 1 of 19
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Leo Gus		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Gus Haddad		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1739 El Paso, TX 79949-1739		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Oscar		CITY CLERK D. ST. MAY - 1 PM 4:31
	NICKNAME LAST SUFFIX Ornelas Jr.		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1111 Montana El Paso, TX 79902-5509		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 542-1693		
8 REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☒ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 03/31/2009 04/29/2009		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special 05/09/2009		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Mayor
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS ☐ 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 Haddad, Leo Gus (Mr.)

15 ACCOUNT # (Ethics Commission filers)
0000000116 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION
TOTALS1. 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)

\$ 40,075.00

EXPENDITURE
TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 36,974.93

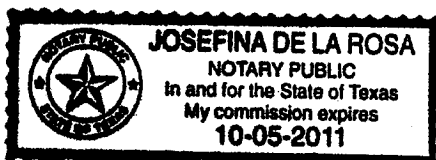
CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 7,797.02

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 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]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Leo Gus Haddad, this the 1st day of May, 2009, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Josefina De La Rosa
Print name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/9 Report: 3/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/24/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Allen, Austin

6 Contributor address; City; State; Zip Code
2313 Ochoa
El Paso, TX 79902

7 Amount of contribution (\$)

\$850.00

8 In-kind contribution description (if applicable)
Fundraiser

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Executive

10 Employer (See Instructions)
The Black Market

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Azar, Elias

Contributor address; City; State; Zip Code
5741 Oak Cliff Dr
El Paso, TX 79912

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

04/21/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Boggs, Randall

Contributor address; City; State; Zip Code
6028 Camino Alegre Dr
El Paso, TX 79912

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bouck Family Trust

Contributor address; City; State; Zip Code
8085 Warren Ct
Granite Bay, CA 95746

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
N/A

Date

04/17/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bradford, Bruce

Contributor address; City; State; Zip Code
6533 Eagle Ridge
El Paso, TX 79912

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/9 Report: 4/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/21/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Casner, Irene D

6 Contributor address; City; State; Zip Code
1102 Los Jardines
El Paso, TX 79912

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chambliss, D W

Contributor address; City; State; Zip Code
5435 Sur Mer Dr
El Dorado Hills, CA 95762

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
Waste Connection

Date

04/17/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chanoux, Marsha

Contributor address; City; State; Zip Code
622 Gary Ln
El Paso, TX 79922

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Restaurateur

Employer (See Instructions)
Sorrento Italian Restaurant

Date

04/17/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chemali, Victor

Contributor address; City; State; Zip Code
8904 Mettler
El Paso, TX 79925

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/17/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chemali, Victor

Contributor address; City; State; Zip Code
8904 Mettler
El Paso, TX 79925

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

CITY CLERK DEPT.

APR 17 2009 4:31 PM

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/9 Report: 5/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/15/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Chica, Anthony

6 Contributor address; City; State; Zip Code
3536 S W 152 Passage
Miami, FL 33188

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Best efforts

10 Employer (See Instructions)
Best efforts

Date

04/21/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doolittle, George T

Contributor address; City; State; Zip Code
6700 N Mesa
Ste 201
El Paso, TX 79912

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
El Paso Apartment Assc Better Govt Fund

Contributor address; City; State; Zip Code
5730 E Paisano
El Paso, TX 79925

Amount of contribution (\$)

\$750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
PAC

Date

04/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Elliot, Don

Contributor address; City; State; Zip Code
3201 Old Spanish Trail
El Paso, TX 79904

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Esquivel, Estela

Contributor address; City; State; Zip Code
7117 Pear Tree Ln
El Paso, TX 79915

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
Interair

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/9 Report: 6/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/26/2009

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

Ferris, Christopher

6 Contributor address; City; State; Zip Code

3737 N Mesa
Ste D1
El Paso, TX 79902

7 Amount of
contribution (\$)

\$600.00

8 In-kind contribution
description (if applicable)
Fundraiser

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Disk Jockey

10 Employer (See Instructions)
Self Employed

Date

04/17/2009

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

Feuille, Richard H

Contributor address; City; State; Zip Code

1021 Broadmoor
El Paso, TX 79912

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/17/2009

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

Francis, Lawrence G

Contributor address; City; State; Zip Code

817 Wingfoote
El Paso, TX 79912

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/06/2009

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

Freeman, Roland J

Contributor address; City; State; Zip Code

3404 Cascadera
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

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

Ghaleb, Melhem R

Contributor address; City; State; Zip Code

1437 Belvidere St
El Paso, TX 79912

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Physician

Employer (See Instructions)
Self Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/9 Report: 7/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/06/2009

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

Haddad, Joyce

6 Contributor address; City; State; Zip Code

4009 Las Vegas Dr

El Paso, TX 79902

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/15/2009

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

Hansen, Russell

Contributor address; City; State; Zip Code

5835 Cromo

Ste 2

El Paso, TX 79912

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Self Employed

Date

04/17/2009

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

John, Kenneth G

Contributor address; City; State; Zip Code

908 Kerbey Ave

El Paso, TX 79902

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/08/2009

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

Kimmelman, Gil

Contributor address; City; State; Zip Code

305 S El Paso St

El Paso, TX 79901

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

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

Little, James

Contributor address; City; State; Zip Code

1971 Brook Mar Dr

El Dorado Hills, CA 95762

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Executive

Employer (See Instructions)

Waste Connections Inc

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/9 Report: 8/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/15/2009

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

Luna, Belinda M

6 Contributor address; City; State; Zip Code

1427 Hawthorne St
El Paso, TX 799027 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/06/2009

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

Lyon, Susan Joan

Contributor address; City; State; Zip Code

1621 Rim Rd
El Paso, TX 79902Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

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

Maldonado, Gina

Contributor address; City; State; Zip Code

6024 Palmdale
El Paso, TX 79932Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

N/A

Date

04/15/2009

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

Maldonado, Hector

Contributor address; City; State; Zip Code

6024 Palmdale
El Paso, TX 79932Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☒

Principal occupation / Job title (See Instructions)

Physician

Employer (See Instructions)

Self Employed

Date

04/15/2009

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

Martinez, Raul

Contributor address; City; State; Zip Code

7005 McNutt Rd
Anthony, NM 88021Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Best efforts

Employer (See Instructions)

Best efforts

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/9 Report: 9/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/24/2009

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

Purcell, James M

6 Contributor address; City; State; Zip Code

10430 Janway Dr
El Paso, TX 79925

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/15/2009

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

RDM Management LP

Contributor address; City; State; Zip Code

1312 Crocker Dr
El Dorado Hills, CA 95762

Amount of
contribution (\$)

\$13,500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
N/A

Date

04/15/2009

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

Roberts, Jason

Contributor address; City; State; Zip Code

1702 Northwood Rd
Austin, TX 78703

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Best efforts

Employer (See Instructions)
Best efforts

Date

04/15/2009

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

Rogers, Jonathan W Jr

Contributor address; City; State; Zip Code

1600 Dede Ln
El Paso, TX 79902

Amount of
contribution (\$)

\$2,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☒

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
St Regis Airport Properties

Date

04/21/2009

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

Roof, James D Jr

Contributor address; City; State; Zip Code

204 W Riverside Dr
Ruidoso, NM 88345

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/9 Report: 10/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/24/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rosales, Joe A

6 Contributor address; City; State; Zip Code
9104 Mettler St
El Paso, TX 79925

7 Amount of contribution (\$)

\$3,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Executive

10 Employer (See Instructions)
JAR Concrete

Date

04/17/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schwartz, Stuart

Contributor address; City; State; Zip Code
1025 Singing Hills
El Paso, TX 79912

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shallenberger, Samuel P

Contributor address; City; State; Zip Code
8300 Cielo Vista Dr
El Paso, TX 79925

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
Western Wholesale Supply

Date

04/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Taylor, Thomas D

Contributor address; City; State; Zip Code
10332 Suez
El Paso, TX 79925

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tokoph, David

Contributor address; City; State; Zip Code
PO Box 12
Santa Teresa, NM 88008

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
Aero Zambia Ltd

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/9 Report: 11/19

2 FILER NAME Haddad, Leo Gus (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/15/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Tokoph, David Jr**6** Contributor address; City; State; Zip Code
2516 13th St NW
Washington, DC 20009**7** Amount of
contribution (\$)

\$1,000.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)
Best efforts**10** Employer (See Instructions)
Best efforts

Date

04/29/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Troncoso, Linda CContributor address; City; State; Zip Code
730 McKelligon Dr
El Paso, TX 79902Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/25/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wolf, AbieContributor address; City; State; Zip Code
12947 Montana
El Paso, TX 79938Amount of
contribution (\$)

\$4,000.00

In-kind contribution
description (if applicable)
Busses(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Auto sales/salvageEmployer (See Instructions)
Self EmployedCITY CLERK DEPT.
09 MAY - 1 PM 4:31

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/3 Report: 12/19**2** FILER NAME Haddad, Leo Gus (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	7 Amount (\$)
03/31/2009	Benning, G Henry	\$92.00
	6 Payee address; City; State; Zip Code 1205 Myrtle Ave El Paso, TX 79901	

8 Purpose of payment (See instructions regarding type of information required.)
Reimbursement - Office supplies**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
04/11/2009	Fastsigns	\$779.40
	Payee address; City; State; Zip Code 4224 N Mesa Unit F El Paso, TX 79902	

Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
04/01/2009	Office Depot	\$313.93
	Payee address; City; State; Zip Code 801 Sunland Park Dr Ste B201 El Paso, TX 79912	

Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
03/31/2009	Oscar Ornelas Jr CPA	\$479.80
	Payee address; City; State; Zip Code 1111 Montana Ave El Paso, TX 79902	

Purpose of payment (See instructions regarding type of information required.)
Treasury services** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/3 Report: 13/19**2** FILER NAME Haddad, Leo Gus (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 04/16/2009	5 Payee name Oscar Ornelas Jr CPA 6 Payee address; City; State; Zip Code 1111 Montana Ave El Paso, TX 79902	7 Amount (\$) \$1,130.00
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8 Purpose of payment (See instructions regarding type of information required.)
Treasury services**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 04/01/2009	Payee name Paypal Payee address; City; State; Zip Code 2145 Hamilton Ave San Jose, CA 95125	Amount (\$) \$1.03
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Purpose of payment (See instructions regarding type of information required.)
Credit card** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 04/08/2009	Payee name Paypal Payee address; City; State; Zip Code 2145 Hamilton Ave San Jose, CA 95125	Amount (\$) \$7.55
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Purpose of payment (See instructions regarding type of information required.)
Credit card** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 04/29/2009	Payee name Paypal Payee address; City; State; Zip Code 2145 Hamilton Ave San Jose, CA 95125	Amount (\$) \$6.10
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Purpose of payment (See instructions regarding type of information required.)
Credit card** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:CITY CLERK
DEPT.
09 MAY -1 PM '09

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/3 Report: 14/19**2** FILER NAME Haddad, Leo Gus (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	7 Amount (\$)
04/08/2009	The Forma Group	
	6 Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$1,800.00

8 Purpose of payment (See instructions regarding type of information required.)
Advertising**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
04/08/2009	The Forma Group	
	Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$19,000.00

Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
04/08/2009	The Forma Group	
	Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$2,000.00

Purpose of payment (See instructions regarding type of information required.)
Consulting services** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
04/21/2009	The Forma Group	
	Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$9,000.00

Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/5 Report: 15/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date 04/03/2009	5 Payee name 7-11 6 Payee address; City; State; Zip Code 400 S Mesa Hills El Paso, TX 79912 7 Purpose of expenditure (See instructions regarding type of information required.) Fuel (If travel outside of Texas, complete Schedule T) ☐	8 Amount (\$) \$5.00 ☒ Reimbursement from political contributions intended
Date 04/06/2009	Payee name 7-11 Payee address; City; State; Zip Code 400 S Mesa Hills El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Fuel (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$10.00 ☒ Reimbursement from political contributions intended
Date 04/15/2009	Payee name 7-11 Payee address; City; State; Zip Code 6500 Escondido El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Fuel (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$15.00 ☒ Reimbursement from political contributions intended
Date 04/17/2009	Payee name 7-11 Payee address; City; State; Zip Code 3601 Montana El Paso, TX 79903 Purpose of expenditure (See instructions regarding type of information required.) Fuel (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$5.00 ☒ Reimbursement from political contributions intended
Date 04/26/2009	Payee name A S Warehouse Corp Payee address; City; State; Zip Code 3324 Durazno El Paso, TX 79905 Purpose of expenditure (See instructions regarding type of information required.) Gifts - grassroots (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$97.40 ☒ Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/5 Report: 16/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT #

(Ethics Commission filers)

00000001

4 Date	5 Payee name Big Lots	8 Amount (\$)
04/22/2009	6 Payee address; City; State; Zip Code 7025 N Mesa El Paso, TX 79912	\$16.24
	7 Purpose of expenditure (See instructions regarding type of information required.) Office equipment (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Chavira, Refugio	Amount (\$)
04/11/2009	Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915	\$300.00
	Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Chavira, Refugio	Amount (\$)
04/18/2009	Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915	\$250.00
	Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Chavira, Refugio	Amount (\$)
04/25/2009	Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915	\$250.00
	Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Chavira, Refugio	Amount (\$)
04/29/2009	Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915	\$211.00
	Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/5 Report: 17/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT #

(Ethics Commission filers)

00000001

4 Date	5 Payee name El Paso Chamber of Commerce	8 Amount (\$)
04/15/2009	6 Payee address; City; State; Zip Code 10 Civic Center Plz El Paso, TX 79901	\$12.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Meals - forums (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Great American Land & Cattle Company	Amount (\$)
04/20/2009	Payee address; City; State; Zip Code 701 S Mesa Hills El Paso, TX 79912	\$33.93
	Purpose of expenditure (See instructions regarding type of information required.) Meals - campaign meeting (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Home Depot	Amount (\$)
04/01/2009	Payee address; City; State; Zip Code 7545 N Mesa El Paso, TX 79912	\$27.85
	Purpose of expenditure (See instructions regarding type of information required.) Advertising supplies (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Home Depot	Amount (\$)
04/06/2009	Payee address; City; State; Zip Code 7545 N Mesa El Paso, TX 79912	\$66.53
	Purpose of expenditure (See instructions regarding type of information required.) Advertising supplies (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Home Depot	Amount (\$)
04/08/2009	Payee address; City; State; Zip Code 7545 N Mesa El Paso, TX 79912	\$22.04
	Purpose of expenditure (See instructions regarding type of information required.) Advertising supplies (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended

CITY CLERK DEPT.
09 MAY - 10 PM 4:32

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/5 Report: 18/19**2 FILER NAME** Haddad, Leo Gus (Mr.)**3 ACCOUNT #** (Ethics Commission filers)
00000001

4 Date 04/15/2009	5 Payee name Home Depot 6 Payee address; City; State; Zip Code 7545 N Mesa El Paso, TX 79912 7 Purpose of expenditure (See instructions regarding type of information required.) Advertising supplies (If travel outside of Texas, complete Schedule T) ☐	8 Amount (\$) \$5.79 ☒ Reimbursement from political contributions intended
Date 04/16/2009	Payee name Home Depot Payee address; City; State; Zip Code 7545 N Mesa El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Advertising supplies (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$11.19 ☒ Reimbursement from political contributions intended
Date 04/02/2009	Payee name International House of Pancakes Payee address; City; State; Zip Code 6080 Gateway East El Paso, TX 79905 Purpose of expenditure (See instructions regarding type of information required.) Meals - campaign meeting (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$27.97 ☒ Reimbursement from political contributions intended
Date 04/24/2009	Payee name Office Depot Payee address; City; State; Zip Code 801 Sunland Park Dr Ste B201 El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$396.19 ☒ Reimbursement from political contributions intended
Date 04/17/2009	Payee name Sam's Wholesale Club Payee address; City; State; Zip Code 7970 N Mesa El Paso, TX 79932 Purpose of expenditure (See instructions regarding type of information required.) Meals - grassroots (If travel outside of Texas, complete Schedule T) ☐	Amount (\$) \$35.94 ☒ Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/5 Report: 19/19

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT #

(Ethics Commission filers)

00000001

4 Date	5 Payee name Sam's Wholesale Club	8 Amount (\$)
04/20/2009	6 Payee address; City; State; Zip Code 7970 N Mesa El Paso, TX 79932	\$19.97
	7 Purpose of expenditure (See instructions regarding type of information required.) Meals - grassroots (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name Sam's Wholesale Club	Amount (\$)
04/21/2009	Payee address; City; State; Zip Code 7970 N Mesa El Paso, TX 79932	\$33.28
	Purpose of expenditure (See instructions regarding type of information required.) Meals - grassroots (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name US Postal Service	Amount (\$)
04/06/2009	Payee address; City; State; Zip Code 5981 N Mesa El Paso, TX 79912	\$42.00
	Purpose of expenditure (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name US Postal Service	Amount (\$)
04/06/2009	Payee address; City; State; Zip Code 5981 N Mesa El Paso, TX 79912	\$10.80
	Purpose of expenditure (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended
Date	Payee name VFW Post 6388	Amount (\$)
04/20/2009	Payee address; City; State; Zip Code 9170 Cananea Ln El Paso, TX 79907	\$460.00
	Purpose of expenditure (See instructions regarding type of information required.) Rent - grassroots (If travel outside of Texas, complete Schedule T) ☐	☒ Reimbursement from political contributions intended

CANDIDATE / OFFICEHOLDER SPECIAL PRE-ELECTION REPORT

FORM C/OH-T

1 ACCOUNT # (Ethics Commission filers) 00000001		2 PAGE # 1 of 1		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR Mr.		FIRST Leo Gus	
		NICKNAME Gus		LAST Haddad	
				MI SUFFIX	
4 CANDIDATE / OFFICEHOLDER ADDRESS		ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE PO Box 1739 El Paso, TX 79949-1739			
5 OFFICE SOUGHT		Mayor			
POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES)					
6 Date		7 Contributor name		9 Amount of contribution (\$)	
04/30/2009		Abraham, Bryan		\$1,000.00	
		8 Contributor address; City; State; Zip Code			
		5401 Tierra Vista Ln El Paso, TX 79932			
				(If travel outside of Texas, complete Schedule T) ☐	
Date		Contributor name		Amount of contribution (\$)	
05/01/2009		Foster, Robert F		\$2,000.00	
		Contributor address; City; State; Zip Code			
		1790 Lee Trevino Ste 601 El Paso, TX 79936			
				(If travel outside of Texas, complete Schedule T) ☐	
Date		Contributor name		Amount of contribution (\$)	
05/01/2009		Robert & Dell Elias Trust		\$3,000.00	
		Contributor address; City; State; Zip Code			
		PO Box 6174 Incline Village, NV 89450			
				(If travel outside of Texas, complete Schedule T) ☐	
Date		Contributor name		Amount of contribution (\$)	
		Contributor address; City; State; Zip Code			
				(If travel outside of Texas, complete Schedule T) ☐	