Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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)

2 Total pages filed: **50**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: **Steve** | MI

NICKNAME | LAST: **Ortega** | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX: **500 W.Overland 250K** | APT / SUITE #: | CITY: **El Paso** | STATE: **TX** | ZIP CODE: **79901**

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: **(915)** | PHONE NUMBER: **915 613-7687** | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: **Michael** | MI

NICKNAME | LAST: **Guerra** | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE): **201 E. Main, Ste. 1200** | APT / SUITE #: | CITY: **El Paso** | STATE: **TX** | ZIP CODE: **79901**

8 CAMPAIGN TREASURER PHONE

AREA CODE: ( ) | PHONE NUMBER | EXTENSION

9 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ☐ 8th day before election
- ☒ Runoff
- ☐ Exceeded $500 limit
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month **5** / Day **2** / Year **2013** THROUGH Month **6** / Day **5** / Year **2013**

11 ELECTION

ELECTION DATE: Month **6** / Day **15** / Year **2013**

ELECTION TYPE

- ☐ Primary
- ☒ Runoff
- ☐ General
- ☐ Special

12 OFFICE

OFFICE HELD (if any): **City Representative**

13 OFFICE SOUGHT (if known): **Mayor**

OFFICE USE ONLY

Date Received: **CITY CLERK DEPT. 6/7/2013 4:55:54 PM**

Date Hand-delivered or Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
Steve Ortega

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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

☐ GENERAL

☐ SPECIFIC

☐ additional pages

COMMITTEE NAME

CITY CLERK DEPT.

6/7/2013 4:55:54 PM

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 3548
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 90,704
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$
4.	**TOTAL POLITICAL EXPENDITURES**	$ 102,220.88
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 27,193.61
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

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.

Steve Ortega
*** Electronically Certified ***
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jacqueline Leyva, this the 07 day of Jun, 20 13, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/2/13	BENITEZ, A MARK 9268 MCFALL EL PASO, TX 79925	200			
5/2/13	BERNAL, ABELARDO 521 TEXAS AVE. EL PASO, TX 79901	100			
5/2/13	BIEGANOWSKI, TONI 716 YORKSHIRE CT. EL PASO, TX 79922	250			
5/2/13	BRANCH, DAVID R. 5203 WIMBLEDON WAY EL PASO, TX 79932	250			
5/2/13	CASTILLO, ROSEMARY 4049 TIERRA SANTA EL PASO, TX 79922	300			

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5/2/13	CORTEZ, LINDA ANN 221 SARGEANT EL PASO, TX 79907	250			
5/2/13	CUMMINGS, CHRIS A. & MICHELLE N. 3923 LAS VEGAS EL PASO, TX	200			
5/2/13	GRANBERG, JOHN 1214 MONTANA EL PASO, TX 79902	100			
5/2/13	GRAY, SHAWN & DONNA 12544 COZY EDGE WAY EL PASO, TX 79928	1000			
5/2/13	ISSAC, JOSEPH & MELISSA R. 3024 POLK AVE. EL PASO, TX 79930	250			

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5/2/13	KING, DANA & NANCY	420 SANTA ALICIA SOLANA BEACH, CA 92075	250			
5/2/13	LEIB, RICHARD & SHARON	455 BARBARA AVE. SOLANA BEACH, CA 92075	250			
5/2/13	LEVERTON, W. REED	300 E. MAIN ST #1240 EL PASO, TX 79901	250			
5/2/13	LOVELESS, EDWARD	21915 ROAN BLUFF SAN ANTONIO, TX 78259	300			
5/2/13	MCCORMICK, EDWARD E.	327 CORAL SKY LANE EL PASO, TX 79912	250			

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5/2/13	MONTIEL, RUDOLF & SANDRA 7100 WESTWIND DR. STE. 250 EL PASO, TX 79912	500			
5/2/13	MOORTHY, CHETAN S. & SADHANA H. CHHEDA 104 CAMINO PENASCO EL PASO, TX 79912	250			
5/2/13	NILAND, JACK 4545 HONEY WILLOW WAY EL PASO, TX 79922	250			
5/2/13	OLIVAS, DAN W. 250 THUNDERBIRD, STE. D EL PASO, TX 79912	250			
5/2/13	ORTEGA, EVELINA 1201 CINCINNATI EL PASO, TX 79902	500			

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5/2/13	ORTEGA, ROBERTO & SYLVIA 1305 LONEWOOD EL PASO, TX 79925	500			
5/2/13	PALAFOX, DAVID 2 WILLIAMSBURG DR. EL PASO, TX 79912	50			
5/2/13	POWNELL, JEFFERY B. 7101 N. MESA EL PASO, TX 79912	150			
5/2/13	REILLY, PATRICK 11714 ALDERHILL TIER SAN DIEGO, CA 92131	250			
5/2/13	ROSS, STEVEN & AMY 1325 CALLE LAGO EL PASO, TX 79912	250			

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5/2/13	SCHWARTZ, SR OR SS 1025 SINGING HILLS EL PASO, TX 79912	250			
5/2/13	TAWNEY, JAMES & ANDREA 1076 YASMIN EL PASO, TX 79932	100			
5/2/13	URBIETA, SUSAN MUNDER 521 TEXAS AVE. EL PASO, TX 79901	150			
5/2/13	VIELLGAS LAW FIRM 1122 MONTANA AVE., STE. 200 EL PASO, TX 79902	300			
5/2/13	VITERBI, ALAN & CARYN ROSEN 4650 RANCHO DEL MAR TRAIL SAN DIEGO, CA 92130	500			

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5/2/13	WENKE, JOHN A.	501 E. CALIFORNIA AVE. EL PASO, TX 79902	250			
5/2/13	YELLEN, TRACY	925 MCKELLIGON EL PASO, TX 79902	500			
5/3/13	AHMANN, THOMAS	5951 MIRA HERMOSA EL PASO, TX 79912	100			
5/3/13	GADDY, LANE	320 CRIMSON CLOUD LN. EL PASO, TX 79912	200			
5/3/13	JIMENEZ, JO & RENEE	325 VISTA DEL REY EL PASO, TX 79912	50			

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5/3/13	LUCERO-MERCADO, ROSE 7879 CLOVER WAY EL PASO, TX 79915	50	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/3/13	SANDERS, CITA 201 E. MAIN, STE. 350 EL PASO, TX 79901	2500	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/3/13	TENET HEALTHCARE CORP PAC 1445 ROSS AVE. STE. 1400 DALLAS, TX 75202	500	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/3/13	SANDERS, WILLIAM 201 E. MAIN, STE 350 EL PASO, TX 79901	2500	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/4/13	BANALES, JOSE XAVIER 4520 SHADY WILLOW EL PASO, TX 79922	250	

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Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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5/4/13	CANO, MARY 3025 TAYLOR EL PASO, TX 79930	250			
5//4/13	FERNANDEZ, ARTHUR 5201 EL PASO DR. EL PASO, TX 79905	200			
5/4/13	LAW, JON G. & PATRICIA 513 CORTO WAY EL PASO, TX 79902	250			
5/4/13	ROHELING, STEVEN 3408 CRAIGO EL PASO, TX 79904	30			
5/4/13	YELLEN, STEVEN T. 925 MCKELLIGON EL PASO, TX 79902	150			

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5/6/13	ADAMS, FAITH ANN	201 S. MAIN ANTHONY, TX 79821	100			
5/6/13	BOMBACH, CARLOS DAVID	4747 EMORY ROAD EL PASO, TX 79922	500			
5/6/13	CERVANTES, ARTURO & DIANNE	3440 ITASCA ST. EL PASO, TX 79936	50			
5/6/13	FEONBERG, STEPHEN L.	4855 N. MESA STE. 120 EL PASO, TX 79912	4000			
5/6/13	GONZALEZ, LUPE F. & JESUS M.	2064 PUEBLO NUEVO CIR EL PASO, TX 79936	500			

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5/6/13	SANDOVAL, JUAN	916 WEST YANDELL, EL PASO, TX 79902	50			
5/6/13	TREPCA/TEXAS ASSOCIATION OF REALTORS	PO BOX 2264, AUSTIN, TX 78768	2000			
5/7/13	BNSF RAIL PAC	PO BOX 961039, FT. WORTH, TX 78701	1000			
5/7/13	BURTON, BILL JR.	720 WALTHAM CT., EL PASO, TX 79922	1500			
5/7/13	FRANCIS, L. FREDERICK	500 N. MESA ST., EL PASO, TX 79901	5000			

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5/7/13	HAMLYN, DEBORAH	1224 MADELINE EL PASO, TX 79902	200			
5/7/13	HOLLAND-BRANCH, PATRICIA	5203 WIMBLEDON WAY EL PASO, TX 79932	1000			
5/7/13	JAIME, IVAN & YESICA L.	5238 STORMY SUNSET SAN ANTONIO, TX 78247	250			
5/7/13	MORGADES, MARTIN	5100 B HUNTERS GLEN CT. EL PASO, TX 79932	500			
5/7/13	NALCACI, MEHMET	1304 BLACKBERRY CT. EL PASO, TX 79936	75			

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5/7/13	O'ROURKE, MELISSA	6041 TOREY PINES EL PASO, TX 79912	250			
5/7/13	THOMPSON, JEFFERY & ELISA	401 BLACK WOLF RUN AUSTIN, TX 78738	250			
5/8/13	CANO, MARY	3025 TAYLOR EL PASO, TX 79930	200			
5/8/13	THE LAW OFFICES OF RUTH REYES	4675 MONTANA EL PASO, TX 79903	1000			
5/8/13	UGUZ, MEHMET	2325 TIERRA BLANCA EL PASO, TX 79938	75			

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5/9/13	BROWN, DORINE 201 WENDA DR. EL PASO, TX 79915	250			
5/9/13	CANDELARIA, ROBERT 11956 DALI WAY EL PASO, TX 79936	100			
5/9/13	CHAPMAN, JACK 221 N. KANSAS, STE. 1910 EL PASO, TX 79901	1500			
5/9/13	JORDAN, CHARLES 7700 CF JORDAN DR. EL PASO, TX 79912	5000			
5/9/13	KUYKKENDALL, BRAD & KATHERINE 10225 BUCKWOOD AVE. EL PASO, TX 79925	1000			

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5/9/13	YUNG, WILLIAM M. & VICKI 1123 RIM ROAD EL PASO,,TX 79902	500			
5/10/13	RINDT, JOHN 4770 RICERCREEK PLACE EL PASO, TX 79935	500			
5/10/13	SCRUGGS, CHARLES 11033 JOHN JANUARY EL PASO, TX 79935	1000			
5/10/13	WALKER, KATHLEEN 749 LOS MIRADORES DR. EL PASO, TX 79912	100			
5/12/13	PALAFOX, PATRICIA 766 A ESPADA EL PASO, TX 79912	150			

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5/12/13	SMITH, EVANS 1614 DELAO ROAD TYLER, TX 75702	250			
5/13/13	GENTILELLO, LARRY & OLIVIA 1020 S. MESA HILLS DR. EL PASO, TX 79912	100			
5/13/13	GRAHAM, JAMES 1385 VISTA GRANDE EL PASO, TX 79936	50			
5/13/13	HAUPT, PAUL 10813 VISTA LOMAS DR. EL PASO, TX 79912	50			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 27

2 FILER NAME
STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/13/13	LEAL, ELIZABETH 1304 RANCHO GRANDE DR. EL PASO, TX 79936	500			
5/13/13	LUCAS, BILLYE & ASHLEY 808 ROYAL OAK EL PASO, TX 79932	25			
5/13/13	NICKEY, JAN 5725 OAK CLIFF EL PASO, TX 79912	200			
5/14/13	BARR, JENNIFER 2201 ST. VRAIN EL PASO, TX 79902	500			
5/15/13	ARANDA, DENISE 6337 FRANKLIN RIDGE DR. EL PASO, TX 79912	50			

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2 FILER NAME
STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/15/13	HOY, ROBERT H. & ROSE ANN 201 VILLA SERNA CT. EL PASO, TX 79922	2500	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/15/13	LASLEY, JENNIE 4022 LAS VEGAS EL PASO, TX 79902	150	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/15/13	ORTEGA, STELLA 2912 BRIDGEHAMPTON CT. FALLS CHURCH, VA 22042	500	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/15/13	PEREA, FRED 7285 CACTUS SPINE LN. EL PASO, TX 79912	50	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/15/13	PORRAS, GARY 359 w. vinton rd. VINTON, TX 79821	1000	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/15/13	SPIER, PETER 1621 CAMINO BELLO EL PASO, TX 79902	100			
5/15/13	TERAN, MARIA F. 4804 VILLA ENCANTO EL PASO, TX 79922	2000			
5/15/13	WAKEEM, CHARLES 741 SOMERSET EL PASO, TX 79912	500			
5/16/13	ORTEGA, ROBERTO & SYLVIA 1305 LONEWOOD EL PASO,TX 79925	1500			
5/16/13	UPDIKE, KATHERINE 5612 CORTINA EL PASO, TX 79912	100			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

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1 Total pages Schedule A: 27

2 FILER NAME
STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/17/13	CROSS, CLINTON F. 332 THUNDERBIRD DR. EL PASO, TX 79912	100			
5/17/13	O'ROURKE, MELISSA 6401 TORREY PINES EL PASO, TX 79912	250			
5/17/13	TURNER, MARCIA 5755 KINGSFIELD EL PASO, TX 79912	100			
5/18/13	EL PASO ASSOCIATION OF FIRE FIGHTERS, LOCAL 51 GPAC 3112 FORNEY DR. EL PASO, TX 79935	2500			
5/18/13	SUMMERFORD, MERRY ANNE 4830 VILLA ENCANTO EL PASO, TX 79922	500			

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SCHEDULE A

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/20/13	ADAME, RAFAEL & NICOLE 764 DAHLIA CT. EL PASO, TX 79922	1000			
5/20/13	BABEL, ISHA 1505 RIM ROAD EL PASO, TX 79902	500			
5/20/13	DECKERT, MYRNA J. 4276 CANTERBURY EL PASO, TX 79902	1000			
5/20/13	ORTEGA, EVELINA 1201 CINCINNATI EL PASO, TX 79902	500			
5/20/13	ROSALES, JOE & SHIRLEY 10205 BUCKWOOD AVE. EL PASO, TX 79925	2500			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

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1 Total pages Schedule A: 27

2 FILER NAME
STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/21/13	GADDY, LANE 320 CRIMSON CLOUD LN. EL PASO, TX 79912	250			
5/21/13	GUTIERREZ, YAHARA 7020 TOLUCA EL PASO, TX 79912	250			
5/22/13	AGUILAR, ABRAHAM 5001 N. MESA, APT 2428 EL PASO, TX 79912	1250			
5/22/13	BAILEY, MELANIE 4601 ESPARZA EL PASO, TX 79934	1250			
5/22/13	FULKERSON, JOSEPH 444 EXECUTIVE CENTER BLVD #238 EL PASO, TX 79902	1250			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/22/13	GRIFFIN, KELI 12221 ROBERTA LYNNE DR. EL PASO, TX 79936	1250			
5/22/13	MASEL, DAVID 24071 SNOWY EGRET COVE SPRINGFIELD, LA 70462	1250			
5/22/13	ROBISON, J. KIRK 4445 N. MESA STE 100 EL PASO, TX 79902	2000			
5/24/13	HOY, ROBERT H. & ROSE ANN 201 VILLA SERENA CT. EL PASO, TX 79922	3000			
5/23/13	BROWN RANCH 123 WEST MILLS, STE 610 EL PASO, TX 79901	1000			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/24/13	MCLAUGHLIN, SCOTT & ADELA 1209 RIM ROAD PL EL PASO, TX 79902	1000	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/24/13	WYATT, MICHAEL 2906 SILVER AVE. EL PASO, TX 79930	100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/26/13	BYRD, LEE 2709 LOUISVILLE EL PASO,TX 79930	100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/26/13	TURES, STEPHEN 1083 ESPLANADA CIRCLE EL PASO, TX 79932	200	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/27/13	ROGERS JR. , JW 1600 DEDE LANE EL PASO, TX 79902	2000	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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1 Total pages Schedule A: 27

2 FILER NAME
STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/28/13	ALMANZAN,ROBERT 8937 PARKLAND DR. EL PASO, TX 79925	250	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/28/13	COLLINS, DANIEL 1616 6TH STREET APT 131 AUSTIN, TX 78703	75	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/28/13	LONGORIA, DANIEL 7840 PICACHO HILLS EL PASO, TX 79912	1000	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/28/13	PALACIOS, RAYMOND & KATHY 637 WILLOW GLEN DR. EL PASO, TX 79922	1000	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/29/13	AGUILAR, RICHARD 8201 LOCKHEED RD. STE 203 EL PASO, TX 79925	1250	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/29/13	ROBERTS, STANLEY & NORA 11652 JAMES WATT DR. EL PASO, TX 79936	100			
5/30/13	MATA, LUPE & ENRIQUE 231 PENNSYLVANIA CIRCLE EL PASO, TX 79903	200			
5/30/13	O'ROURKE, MELISSA 6041 TORREY PINES EL PASO, TX 79912	250			
5/30/13	ORTEGA, ROBERTO & SYLVIA 1305 LONEWOOD EL PASO, TX 79925	500			
5/30/13	SOSA, EDWARD 5701 LOS CERRITOS DR. EL PASO, TX 79912	100			

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/31/13	CASTILLO, EDUARDO	10651 JANWAY EL PASO, TX 79935	200	(If travel outside of Texas, complete Schedule T)		
5/31/13	CHAPMAN, JACK T.	221 N. KANSAS, STE 1910 EL PASO, TX 79901	1000	(If travel outside of Texas, complete Schedule T)		
5/31/13	GENTILELLO, LARRY	1819 S. STREET, APT 204 SACRAMENTO, CA 95811	100	(If travel outside of Texas, complete Schedule T)		
5/31/13	ORTEGA, MICHELLE	3150 YARBOROUGH EL PASO, TX 79925	100	(If travel outside of Texas, complete Schedule T)		
6/3/13	ACKERMAN, JUDITH P.	3344 EILEEN EL PASO, TX 79904	100	(If travel outside of Texas, complete Schedule T)		

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1 Total pages Schedule A: 27

2 FILER NAME: STEVE ORTEGA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
6/2/13	MARCUS, DAVI & JERYL 442 CROWN POINT EL PASO, TX 79912	250			
6/4/13	GANNON, JAMES & CHRISTIAN 4755 PINE CREEK LANE EL PASO, TX 79922	100			
6/4/13	KARR, STEPHANIE PO BOX 288 EL PASO, TX 79943	75			
6/4/13	SMITH, MARK 301 E.SAN ANTONIO B201 EL PASO, TX 79901	300			
6/5/13	AMASTAE, JON & SHARON 3531 FORT BLVD. EL PASO, TX 79930	100			

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SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6/7/13	Gloria Gomez 313 Riverside El Paso, TX 79915	50	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/30/13	Christopher Rojas 1659 Victor Lopez El Paso, TX 79930	40	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/31/13	Gary Sapp 4204 Park Hill El Paso, TX 79902	1,000	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/22/13	Teresa Diaz 812 Cheltenham El Paso, TX 79912	200	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/30/13	Joseph Moody Campaign PO Box 920827 El Paso, TX 79902	500	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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PLEDGED CONTRIBUTIONS

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SCHEDULE B

The Instruction Guide explains how to complete this form.	1 Total pages Schedule B:
2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨	$

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:______) / 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable) (If travel outside of Texas, complete Schedule T)
10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)		
Date	Full name of pledgor ☐ out-of-state PAC (ID#:______) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of pledgor ☐ out-of-state PAC (ID#:______) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of pledgor ☐ out-of-state PAC (ID#:______) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of pledgor ☐ out-of-state PAC (ID#:______) / Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan

6 Is lender a financial Institution? Y N

7 Name of lender ☐ out-of-state PAC (ID#:_____)

8 Lender address; City; State; Zip Code

9 Loan Amount ($)

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral ☐ none

15 Check if personal funds were deposited into political account ☐

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Is lender a financial Institution? Y N

Name of lender ☐ out-of-state PAC (ID#:_____)

Lender address; City; State; Zip Code

Loan Amount ($)

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral ☐ none

Check if personal funds were deposited into political account ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation (See Instructions)

Employer (See Instructions)

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If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name	
5/9/13	Dora Rodriguez	
6 Amount ($)	**7** Payee address; City; State; Zip Code	
1079	1404 Monte Negro El Paso, TX 79935	
8 PURPOSE OF EXPENDITURE	**(a)** Category (See categories listed at the top of this schedule)	**(b)** Description (If travel outside of Texas, complete Schedule T)
	Transportation and related expenses	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
05/09/13	Krispy Kreme	
Amount ($)	Payee address; City; State; Zip Code	
$8.99	11915 Gateway Blvd. West, El Paso, TX, 79936	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/beverage	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
05/09/13	Bain Construction	
Amount ($)	Payee address; City; State; Zip Code	
$500.00	14160 Blair Dr, Horizon City, TX 79928	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Reimbursement	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
05/10/13	A Floral Dream	
Amount ($)	Payee address; City; State; Zip Code	
$1,800.00	P.O. Box 16274 El Paso, TX, 79926	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising/campaign signs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES

CITY CLERK DEPT.

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **16**	2 FILER NAME **Steve Ortega**	3 ACCOUNT # (Ethics Commission Filers)
4 Date **05/10/13**	5 Payee name **Forma Group**	
6 Amount ($) **$12,000.00**	7 Payee address; City; State; Zip Code **301 E. San Antonio, Ste. B201, El Paso, TX, 79901**	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) **Consulting (mailer)**	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date **05/11/13**	Payee name **The Garden**	
Amount ($) **$1,500.00**	Payee address; City; State; Zip Code **511 Western, El Paso, TX, 79901**	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) **Political event**	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date **05/13/13**	Payee name **Forma Group**	
Amount ($) **$10,000.00**	Payee address; City; State; Zip Code **301 E. San Antonio, Ste. B201, El Paso, TX, 79901**	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) **Consulting (mailer)**	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date **05/20/13**	Payee name **Dora Rodriguez**	
Amount ($) **$1,458.42**	Payee address; City; State; Zip Code **1404 Monte Negro, El Paso, TX, 79935**	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) **Transportation and related expense**	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
5/2/2013	Barracuda Consulting

6 Amount ($)	7 Payee address; City; State; Zip Code
437.33	2209 Pittsburg, El Paso, TX 79930

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Consulting Expense	

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

Date	Payee name
5/4/2013	Sams Club

Amount ($)	Payee address; City; State; Zip Code
41.71	7970 N. Mesa St, El Paso, TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food and Beverage Expense	

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

Date	Payee name
5/7/2013	Costco

Amount ($)	Payee address; City; State; Zip Code
95.82	6101 Gateway West, El Paso, TX 79925

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food and Beverage Expense	

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

Date	Payee name
5/7/2013	Forma Group

Amount ($)	Payee address; City; State; Zip Code
29,000	301 E. San Antonio, Ste, B201, El Paso, TX 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting Expense/Advertising Expense	

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/20/13	Wal-Mart

6 Amount ($)	7 Payee address; City; State; Zip Code
$22.46	7101 Gateway Blvd. West, El Paso, TX, 79925

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Food/beverage	

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

Date	Payee name
05/21/13	All Print

Amount ($)	Payee address; City; State; Zip Code
$357.23	7230 Gateway Blvd. East #D, El Paso, TX, 79925

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising/political handouts	

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

Date	Payee name
05/21/13	Barracuda Consulting

Amount ($)	Payee address; City; State; Zip Code
$1,000.00	2209 Pittsburg, El Paso, TX, 79930

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting/T-shirts	

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

Date	Payee name
6/4/2012	All Print

Amount ($)	Payee address; City; State; Zip Code
714.45	7230 Gateway East, El Paso, TX 79915

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Handouts, door hangars

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/24/13	Forma Group

6 Amount ($)	7 Payee address; City; State; Zip Code
$18,971.60	301 E. San Antonio, Ste. B201, El Paso, TX, 79901

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Consulting (mailer)	

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

Date	Payee name
05/25/13	Office Depot

Amount ($)	Payee address; City; State; Zip Code
$68.74	801 Sunland Park Drive, El Paso, TX, 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Printing expense	

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

Date	Payee name
05/27/13	Forma Group

Amount ($)	Payee address; City; State; Zip Code
$4,959.00	301 E. San Antonio, Ste. B201, El Paso, TX, 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting (mailer)	

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

Date	Payee name
05/28/13	Office Depot

Amount ($)	Payee address; City; State; Zip Code
$144.72	801 Sunland Park Drive, El Paso, TX, 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Printing expense	

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/29/13	Office Depot

6 Amount ($)	7 Payee address; City; State; Zip Code
$19.47	1111 Geronimo, El Paso, TX, 79925

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Printing expense	

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

Date	Payee name
06/01/13	Krispy Kreme

Amount ($)	Payee address; City; State; Zip Code
$11.58	11915 Gateway Blvd. West, El Paso, TX, 79936

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/beverage	

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

Date	Payee name
06/01/13	Little Caesar's

Amount ($)	Payee address; City; State; Zip Code
$21.65	2500 N. Mesa, El Paso, TX, 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/beverage	

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

Date	Payee name
06/01/13	Office Depot

Amount ($)	Payee address; City; State; Zip Code
$108.25	1111 Geronimo, El Paso, TX, 79925

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Printing expense	

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
06/01/13	7-11 (Seven-Eleven)

6 Amount ($)	7 Payee address; City; State; Zip Code
$2.48	2112 N. Mesa, El Paso, TX, 79902

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Beverage expense	

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

Date	Payee name
06/04/13	El Paso Community Foundation

Amount ($)	Payee address; City; State; Zip Code
$200.00	333 N. Oregon, El Paso, TX, 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Donation	

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

Date	Payee name
05/09/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$148.50	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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

Date	Payee name
05/10/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$3.20	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/12/13	PayPal

6 Amount ($)	7 Payee address; City; State; Zip Code
$7.55	1-800-852-1973

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/13/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$26.15	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/14/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$14.80	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/15/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$12.82	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/16/13	PayPal

6 Amount ($)	7 Payee address; City; State; Zip Code
$4.23	1-800-852-1973

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/17/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$12.50	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/21/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$15.10	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/22/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$183.92	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 16	2 FILER NAME Steve Ortega	3 ACCOUNT # (Ethics Commission Filers)
4 Date 05/23/13	5 Payee name PayPal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code 1-800-852-1973	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution fees	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 05/26/13	Payee name PayPal	
Amount ($) $10.47	Payee address; City; State; Zip Code 1-800-852-1973	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributon fees	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 05/28/13	Payee name PayPal	
Amount ($) $41.08	Payee address; City; State; Zip Code 1-800-852-1973	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution fees	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 05/29/13	Payee name PayPal	
Amount ($) $36.55	Payee address; City; State; Zip Code 1-800-852-1973	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution fees	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/30/13	PayPal

6 Amount ($)	7 Payee address; City; State; Zip Code
$12.76	1-800-852-1973

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
05/31/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$5.11	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
06/01/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$1.75	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
06/02/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
$8.29	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
06/05/13	PayPal

6 Amount ($)	7 Payee address; City; State; Zip Code
$0.88	1-800-852-1973

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Contribution fees	

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

Date	Payee name
06/5/13	UPS

Amount ($)	Payee address; City; State; Zip Code
$33.00	219 E. Mills, El Paso, TX, 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Mail/postage	

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

Date	Payee name
05/05/13	Forma Group

Amount ($)	Payee address; City; State; Zip Code
$14,097.65	301 E. San Antonio, Ste. B201, El Paso, TX, 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting/advertising/printing expense	

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

Date	Payee name
06/05/13	Adam Pena

Amount ($)	Payee address; City; State; Zip Code
$1,000.00	11721 Tony Tejeda, El Paso, TX, 79936

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Salaries/wages--campaign services	

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

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES

CITY CLERK DEPT.

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16	Steve Ortega	

4 Date	5 Payee name
05/24/13	Adam Pena

6 Amount ($)	7 Payee address; City; State; Zip Code
$793.68	11721 Tony Tejeda Dr., El Paso, TX, 79936

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Salaries/wages--campaign services	

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

Date	Payee name
5/2/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
9.30	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution Fees	

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

Date	Payee name
5/3/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
11.05	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution Fees	

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

Date	Payee name
5/4/13	PayPal

Amount ($)	Payee address; City; State; Zip Code
7.27	1-800-852-1973

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution Fees	

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

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 16	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5/6/13	5 Payee name PayPal	
6 Amount ($) 1.75	7 Payee address; City; State; Zip Code 1-800-852-1973	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution Fees	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 5/7/13	Payee name PayPal	
Amount ($) 7.55	Payee address; City; State; Zip Code 1-800-852-1973	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution Fees	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 5/6/13	Payee name Constant Contact	
Amount ($) 58.63	Payee address; City; State; Zip Code 122 Hudson 3rd Fl, NY,NY 10013	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Tech Services	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
16		

4 Date	5 Payee name
5/11/13	**Enterprise Rental Car**

6 Amount ($)	7 Payee address; City; State; Zip Code
793.68	**5710 Montana El Paso, TX 79925**

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Rental	

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

Date	Payee name
35.37	**Costco**

Amount ($)	Payee address; City; State; Zip Code
5/13/13	**6101 Gateway West, El Paso, TX 79925**

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food and Beverage Expense	

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

Date	Payee name
5/13/13	**Target**

Amount ($)	Payee address; City; State; Zip Code
44.74	**1901 George Dieter, El Paso, TX 79936**

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Foor and Beverage Expense	

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

Date	Payee name
5/15/2013	**Paypal**

Amount ($)	Payee address; City; State; Zip Code
30.00	**1-800-852-1973**

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Fees	**Credit Card Processing**

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

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POLITICAL EXPENDITURES

CITY CLERK DEPT.

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **16**	2 FILER NAME **Steve Ortega**	3 ACCOUNT # (Ethics Commission Filers)
4 Date **5/21/2013**	5 Payee name **AT&T**	
6 Amount ($) **133.23**	7 Payee address; City; State; Zip Code **2701 N. Mesa El Paso, TX 79902**	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) **Office Overhead**	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date **5/7/13**	Payee name **Office Depot**	
Amount ($) **47.60**	Payee address; City; State; Zip Code **1313 George Dieter, El Paso, TX 79936**	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) **Office Overhead**	Description (If travel outside of Texas, complete Schedule T) **Office Supplies**
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date **5/8/13**	Payee name **Costco**	
Amount ($) **46.00**	Payee address; City; State; Zip Code **6101 Gateway West, El Paso, TX 79925**	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) **Travel In District**	Description (If travel outside of Texas, complete Schedule T) **Fuel Expense**
Complete ONLY 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	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

CITY CLERK DEPT.

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount ($) ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)

Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Date	Payee name	
Amount ($) ☐ Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount ($)	7 Business address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Business name	
Amount ($)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Business name	
Amount ($)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Business name	
Amount ($)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	**2** FILER NAME	**3** ACCOUNT # (Ethics Commission Filers)
4 Date	**5** Payee name	
6 Amount ($)	**7** Payee address; City; State; Zip Code	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See categories listed at the top of this schedule)	**(b)** Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

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INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K: **1**

2 FILER NAME **Steve Ortega**

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received / 6 Address of person from whom amount is received; City; State; Zip Code	8 Amount ($)
5/10/2013	**Steve Ortega** **1644 Lomaland Dr, Apt 150, El Paso, TX 79935**	**315.84**
	7 Purpose for which amount is received: **Reimbursement to campaign for unintentional use of campaign debit card. Expenses reported on 8th Day CFR.**	
Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
6/5/2013	**Steve Ortega**	**32.26**
	Purpose for which amount is received	
Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received	
Date	Name of person from whom amount is received / Address of person from whom amount is received; City; State; Zip Code	Amount ($)
	Purpose for which amount is received	

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IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME	2 ACCOUNT # (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder