

FORM COR-C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed: 72		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME	LAST	SUFFIX		
4 ORIGINAL REPORT TYPE	☐ January 15 ☐ Runoff ☐ Other (specify) _____ ☐ July 15 ☐ Exceeded \$500 limit ☐ 30th day before election ☐ 15th day after treasurer appointment (officeholder only) ☒ 8th day before election ☐ Final report				
	5 ORIGINAL PERIOD COVERED				
Month Day Year Month Day Year 4 / 2 / 13 THROUGH 5 / 1 / 13					

6 EXPLANATION OF CORRECTION

The original COH Campaign Finance Report was timely filed. On May 6th, the COH identified discrepancies regarding the total contributions and total expenditures previously filed. Upon further review, the COH identified several bookkeeping errors that led to the unintentional omission of several campaign contributions and expenses. The COH has since identified the omitted campaign contribution and expenditures and included them in this amended Campaign Finance Report.

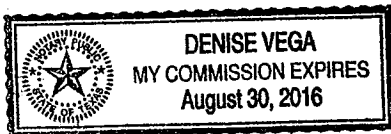
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ **Semiannual reports:** This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports** (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Steve Ortega, this the 16th day of May,

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected before the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected on or after the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

1. Account #. If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you an account number. Put that number in this box. If you do not file with the Ethics Commission, skip this box.

2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.

3. Candidate/Officeholder Name. Put your full name here. Enter your name in the same way as on the report you are correcting.

4. Original Report Type. Mark the type of report you are correcting.

5. Original Period Covered. Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.

6. Explanation of Correction. Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.

7. Affidavit. Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

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MAY 16 PM 1:49

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: 72
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Steve NICKNAME LAST SUFFIX Ortega		OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged CITY CLERK DEPT. MAY 16 11:19
	4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS ☐ change of address 5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION (915) 613 - 7687		
6 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Michael NICKNAME LAST SUFFIX Guerra			
7 CAMPAIGN TREASURER ADDRESS (residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 201 E. Main, Ste.1200, El Paso, TX 79901			
8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION ()			
9 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)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 4 / 2 / 13 5 / 1 / 13		
11 ELECTION	ELECTION DATE Year Month Day Year 5 / 11 / 13 ELECTION TYPE ☐ Primary ☐ Runoff ☒ General ☐ Special		
12 OFFICE	OFFICE HELD (if any) City Representative - District 7	13 OFFICE SOUGHT (if known) Mayor	
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

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

CITY CLERK DEPT.
2013 MAY 16 PM 1:49

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 147,300.50

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 201,296.49

CONTRIBUTION
BALANCE

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

\$ 23,496.24

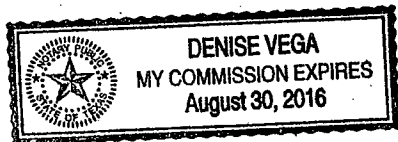
OUTSTANDING
LOAN TOTALS

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.



AFFIX NOTARY STAMP / SEAL ABOVE

Steve Ortega
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Steve Ortega, this the 16th day of May, 20 13, to certify which, witness my hand and seal of office.

Denise Vega
Signature of officer administering oath

Denise Vega
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/9/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/2/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Scott Adams	7 Amount of contribution (\$) 700.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4006 Santa Anita Dr El Paso, TX		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Jo Ann Casey	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1000 Madeline El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Clare A. Cummins	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6006 N. Mesa, Ste 1000 El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Manuel C. Francisco Fallberri	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 10500 Tarnwood Ave El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Art Pater Fierro	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 11612 Tony Tojeda Dr El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/2/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Ricardo Fierro	7 Amount of contribution (\$) 200	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 552 Rosinante El Paso TX 79922		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/2/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jorge Firmanica	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 603 Upson El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/2013	Full name of contributor ☐ out-of-state PAC (ID#) Grayson C. Gearhart	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 732 Rosinante Rd El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/2013	Full name of contributor ☐ out-of-state PAC (ID#) Leonard Goodman III	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4911 Meadowlark El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/2013	Full name of contributor ☐ out-of-state PAC (ID#) Frank Lopez	Amount of contribution (\$) 150	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 317 Prospect El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 4/2/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Dan W. Olivas 6 Contributor address: City: State: Zip Code 240 Thunderbird, Ste D El Paso, TX 79912	7 Amount of contribution (\$) 250	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 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Pirates & Piranhas LLC Contributor address: City: State: Zip Code 500 Sunland Park Drive, Bldg 2-300 El Paso, TX 79912	Amount of contribution (\$) 200	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/2/13	Full name of contributor ☐ out-of-state PAC (ID#) Edward Cossu Contributor address: City: State: Zip Code 5701 Los Cerrillos Drive El Paso, TX 79912	Amount of contribution (\$) 200	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) Jonathan Abrams Contributor address: City: State: Zip Code 9431 Zyle Rd Austin, TX 78737	Amount of contribution (\$) 5,000	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) Robert Bowling IV Contributor address: City: State: Zip Code 457 San Clemente El Paso, TX 79907	Amount of contribution (\$) 500	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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: 48	
2 FILER NAME Stovs Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/3/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Clan Property Management LLC	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 8981 Cassner Dr El Paso, TX 79907		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) Jaeep Damell	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 304 Dream Spirit Santa Teresa, NM 89008		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) EP Epicurean Co., LLC Rulis	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2900 N. Mesa St, Ste K El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) Bonnie Escobar	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1732 Charlie Smith Drive El Paso, TX 79938		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/13	Full name of contributor ☐ out-of-state PAC (ID#) Octavio Gomez	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 904 McKelligon El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/3/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Michael E. Guerra	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 408 Cincinnati El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/3/2013	Full name of contributor ☐ out-of-state PAC (ID#) Robert H. Jr./Rose Ann Hoy	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 201 Villa Serena Ct El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/2013	Full name of contributor ☐ out-of-state PAC (ID#) H. Charles Intebi	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1107 Kelly Way El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/2013	Full name of contributor ☐ out-of-state PAC (ID#) Steffen Poeszger	Amount of contribution (\$) 300	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 123 W. Mills Ave., Ste 500 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/3/2013	Full name of contributor ☐ out-of-state PAC (ID#) Kendal Shipmanatsu	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 511 Western El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 40	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/3/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Luis Talavera	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1011 W. Yandell El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/3/2013	Full name of contributor ☐ out-of-state PAC (ID#) Windle Hood Alley LLP	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code Chase Tower Ste. 1350, 201 E Main El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Rafael Adame	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 764 Dahlia Ct El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Leonardo Alvarado	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3500 N. Mesa Hills El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Armando Amadoriz	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6646 Laguna Vista Dr El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Mario Delancourt	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1113 Eagle Ridge El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Sean Delancourt	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1113 Eagle Ridge El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Selene Delancourt	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1113 Eagle Ridge El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) R. Wes Bransford	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3149 Coyote Park El Paso, TX 79908		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) William R. Campton	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 113 1/2 W 19th St Apt EE-BW New York, NY 10011		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) William R. Caparis	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 517 Trails End Ct. El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Edmund Castle	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1221 Cincinnati El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/2013	Full name of contributor ☐ out-of-state PAC (ID#) Enrique I. Cervantes	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2170 Timberwood Cr Apt 605 El Paso, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/9/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jimmy Davis	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5716 Desert Canyon El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Richard M. Cillon	Amount of contribution (\$) 2,500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 735 Chamberino, NM 88022		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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MAY 16 PM 1:49

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/3/2013 2:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Brad Ducorsky	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 5206 Mira Sierra El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Easy Computing LLC	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 709 El Parque Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Ricardo Fernandez	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4800 N. Stanton Unit 186 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Ricardo Fernandez	Amount of contribution (\$) 2,500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4900 N. Stanton Unit 186 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Kara Frost	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2906 Silver Ave El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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2013 MAY 1 PM 1:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 45	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Joel Guzman	7 Amount of contribution (\$) 200	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1210 Los Angeles Drive El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jorge Guillermo Guzman	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2118 N. Saint Vrain St. El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Harold Hahn	Amount of contribution (\$) 5,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2244 Trawood Ste 100 El Paso, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Harold Hahn	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2244 Trawood Ste 100 El Paso, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) William C. Helm II	Amount of contribution (\$) 120	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1611 Florence El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Sal Hernandez	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 3638 Almond Beach El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Steve Hernandez	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3638 Almond Beach El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Karl Schosser	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 7557 Plaza Terrena El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Rene Hurtado	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1530 Weighman El Paso, TX 79903		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor ☐ out-of-state PAC (ID#) Amuro Iglesias	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4750 Vista del Monte El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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MAY 16 PM 1:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Stephen Ingle	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 504 San Francisco El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Renard Johnson	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 0600 Doering Dr. El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Ted Joseph Karim	Amount of contribution (\$) 400	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 9724 Eastridge Drive El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Don Knapp	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8313 Cincinnati El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Johathan Macias	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3703 Cambridge Ave. El Paso, TX 79903		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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MAY 1 2013 PM 1:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Tim Mallardi	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 123 W. Mills El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Takla O. Mann	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 701 Coeur Delena Cir El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Thomas Marcey	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3712 San Mateo Ln El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Donald R. Margo II	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code P.O. Box 931021 El Paso, TX 79908		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Paul Maxwell	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 709 Waltham El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2013 MAY 1 PM 1:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **49**

2 FILER NAME

Steve Ortega

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/4/2013

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

Chadwick McClesky

6 Contributor address; City; State; Zip Code

5201 Hunters Glen El Paso, TX 79932

7 Amount of contribution (\$)

100

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

4/4/2013

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

J. Sam Moore Jr.

Contributor address; City; State; Zip Code

3941 Flamingo El Paso, TX 79902

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

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

Edgar Mosti

Contributor address; City; State; Zip Code

198 Pale Sage The Woodlands, TX 77382

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

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

Ekhi Munategui

Contributor address; City; State; Zip Code

1009 Metate Pl El Paso, TX 79912

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

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

Michael Noe

Contributor address; City; State; Zip Code

1950 Paseo Arena Pl El Paso, TX 79936

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

49

2 FILER NAME

Steve Ortega

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/4/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

Odasun LLC

6 Contributor address; City; State; Zip Code

500 West Overland Ave Ste 310 El Paso, TX 79901

7 Amount of
contribution (\$)

5000

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

4/4/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Robert O'Rourke

Contributor address; City; State; Zip Code

1209 Prospect St, El Paso, TX 79902

Amount of
contribution (\$)

200

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Francisco J. Ortega

Contributor address; City; State; Zip Code

201 E. Main Drive, El Paso, TX 79901

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Cheryl Padilla

Contributor address; City; State; Zip Code

3268 Tomahawk El Paso, TX 79936

Amount of
contribution (\$)

25

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Eric Pearson

Contributor address; City; State; Zip Code

915 Kern, El Paso, TX 79902

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2013 APR 16 PM 1:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Norbert Porillo	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 115 S. Durango St. El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Amuro Ramos	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4224 Camelot Hts. El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Gustavo Revales	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3514 O'Keefe Drive El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Luis Rich	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5317 Stardust El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Paul Ro	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2209 Pittsburg Ave. El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Justin Ruby	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4903 Love Rd. El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Nick Salgado	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 170 Salgado Anthony, NM 88021		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Jose M. Sanchez	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6201 Escondido 3C El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Gary Sepp	Amount of contribution (\$) 1400	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3124 Piedmont Drive El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Kitty Schild	Amount of contribution (\$) 50	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8136 Pino Road El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Steve G. Shapiro	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1931 Myrtle Ave El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Ted Soltzman	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 700 Meadowlark Drive El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Peter Svarzbein	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 607 Live Oak Drive El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Mary Anne Talbot	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 7129 San Marino Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Anthony M. Tomaszewski	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1520 Wightman El Paso, TX 79903		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) David Tevar	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1109 Lipson El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Justin Underwood	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 201 Rio Tinto El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Marie Urbina	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4800 N. Stanton, Unit 202 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Rodolfo Valdes	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5354 Santa Teresa El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Jim Ward	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 309 Vista Del Rey Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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MAY 16 2013 11:50

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/13	5 Full name of contributor ☐ out-of-state PAC (ID#) Geoffrey Wright	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1303 N. Cotton El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/4/13	Full name of contributor ☐ out-of-state PAC (ID#) Michael Wyatt	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2805 Silver Ave El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/13	Full name of contributor ☐ out-of-state PAC (ID#) Alan R. Abbott	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 300 Coral Sky Lane El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/13	Full name of contributor ☐ out-of-state PAC (ID#) Lene Gaddy	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 320 Crimson Cloud Ln El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/13	Full name of contributor ☐ out-of-state PAC (ID#) Matthew Neessen	Amount of contribution (\$) 2000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5955 S. Desert Blvd El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Haven R. Diane W. Williams	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4649 Globe Willow Dr. El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/5/2013	Full name of contributor ☐ out-of-state PAC (ID#) Scott Winton	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5670 Britain Drive Santa Teresa, NM 88008		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/7/2013	Full name of contributor ☐ out-of-state PAC (ID#) Constance R. John J. Jr. Clemens	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6325 Via Aventura Dr. El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor ☐ out-of-state PAC (ID#) Randy Bowling	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4555 Cchoy El Paso, TX 79924		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor ☐ out-of-state PAC (ID#) William Ellis	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3500 Scenic Crest Cir., No. 8 El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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:	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/9/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Peter Spier	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
6 Contributor address; City; State; Zip Code 1621 Camino Belle El Paso, TX 79902			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/2013	Full name of contributor ☐ out-of-state PAC (ID#) Thea D. Wagner-Chambers	Amount of contribution (\$) 150	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code 3700 Talent Way El Paso, TX 79926			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Adam D/Linda R. Acosta	Amount of contribution (\$) 100	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code 998 Thunderbird Dr El Paso, TX 79912			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Alejandro Acosta	Amount of contribution (\$) 100	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code 5966 Via Cuesta Dr El Paso, TX 79912			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Alejandro Acosta III	Amount of contribution (\$) 100	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code 7230 Wurzbach Apt 401 San Antonio, TX 78240			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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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: 40	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/27/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Patricia Holland Branch	7 Amount of contribution (\$) 1000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 5203 Wimbledon Way El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Sergio Alonso	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 12452 Tierra Sauz El Paso, TX 79938		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jon/Sharon Amestee	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3531 Fort Blvd El Paso, TX 79920		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Gabriela Contreras	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 13970 Wildflower El Paso, TX 79938		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Tim Dippi	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 5570940 El Paso, TX 79940		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/10/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Rodolfo Fernandez-Hapo	7 Amount of contribution (\$) 220	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1033 Calle Parque Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Nicholas Lamantia	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6948 Market Ave El Paso, TX 79915		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Victor M/Katherine A. Marquez	Amount of contribution (\$) 220	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 205 Dream Spint Santa Teresa, NM 88008		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) John G. "Jack" Maxon	Amount of contribution (\$) 750	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5527 N. Mesa El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jose Fong	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2040 Paseo Del Rey El Paso, TX 79938		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/10/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Arturo Pastrana	7 Amount of contribution (\$) 220	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 6117 Villa Suave El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Alejandro Rodriguez	Amount of contribution (\$) 25	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 226 C St NE Apt 3 Washington, DC 20002		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) James Smith	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4160 Pasano El Paso, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jorge A. Valenzuela	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 233 Pennsylvania El Paso, TX 79903		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/10/2013	Full name of contributor ☐ out-of-state PAC (ID#) Carlos G. Edm M. Villarreal	Amount of contribution (\$) 80	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 717 Kapitz Ave El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/10/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Linda Weber	7 Amount of contribution (\$) 20	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 3710 Almond Beach Dr El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/2013	Full name of contributor ☐ out-of-state PAC (ID#) Michael A. Hiett	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4540 Emory Rd. El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/2013	Full name of contributor ☐ out-of-state PAC (ID#) Herschel A. Deborah Stringfield	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 340 Avenida Mirador PO Box 221 Santa Teresa, NM 88008		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) James Donnoau	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3501 Colville Horizon City, TX 79928		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) James D. Shirley M. Dannenbaum	Amount of contribution (\$) 5000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3100 W. Alabama St. Houston, TX 77099		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/12/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Myrna J. Decker	7 Amount of contribution (\$) 1000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4276 Canterbury Dr El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) Tony Furman	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1121 Thunderbird Cr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) Ainsa Huston	Amount of contribution (\$) 2500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5809 Acacia Cir El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) William Loverton	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 208 Country Club Rd El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) Gary R. Sapp	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3124 Piedmont El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/13/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Travis Cosban	7 Amount of contribution (\$) 200	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 918 Gateway Drive El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/13/2013	Full name of contributor ☐ out-of-state PAC (ID#) David S. Jeryl Z. Marcus	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 442 Crown Point El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/2013	Full name of contributor ☐ out-of-state PAC (ID#) Albert R. Moore	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5501 N. Stanton Street, Apt 1 El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/14/2013	Full name of contributor ☐ out-of-state PAC (ID#) Robert A. Jbino S. Snow	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4941 Meadowlark El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/15/2013	Full name of contributor ☐ out-of-state PAC (ID#) Peter Ambler	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2750 14th St. NW, Apt 605 Washington, DC 20009		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/15/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) David Wysong 6 Contributor address: City: State: Zip Code 1133 Baltimore El Paso, TX 79902	7 Amount of contribution (\$) 1,000	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 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Woody L. / Gayle G Hunt Contributor address: City: State: Zip Code PO Box 12720 El Paso, TX 79913	Amount of contribution (\$) 2500	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Veronica Escobar Contributor address: City: State: Zip Code 3914 Copper Ave. El Paso, TX 79930	Amount of contribution (\$) 100	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Paul Haupt Contributor address: City: State: Zip Code 10013 Viera Lomas Dr El Paso, TX 79935	Amount of contribution (\$) 10	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2013	Full name of contributor ☐ out-of-state PAC (ID#) El Paso Association of Fire Fighters, Local 51 GPAC Contributor address: City: State: Zip Code 3112 Forney Dr El Paso, TX 79935	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/16/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Renard U. Johnson	7 Amount of contribution (\$) 1000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1381 Diamond Gate Pl El Paso, TX 79908		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Stan Roberts	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3257 Rain Dance Drive El Paso, TX 79906		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Alan K. Russell	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2500 Scenic Crest #9 El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Annette Stone	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3204 Robert Wynn St El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/16/2013	Full name of contributor ☐ out-of-state PAC (ID#) Paul Dipp	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 55 El Paso, TX 79940		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/18/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Edward Margarita Escudero	7 Amount of contribution (\$) 1,500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 3820 Hillcrest Dr. El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Henry Gallardo	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1800 Olmos St. El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Dan Longoria	Amount of contribution (\$) 3,450	In-kind contribution description (if applicable) advertising expense
Contributor address: City: State: Zip Code 7840 Picacho Hills El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Amy O'Rourke	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1209 Prospect El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Dan Williams	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4100 Churchill Downs Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/30/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Ike Monty III	7 Amount of contribution (\$) 1,000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 7400 Viscount El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Mark Benitez	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 9268 McFall Dr El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Marvin Moore	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 519 East Hague Rd. El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Eric MacDonald	Amount of contribution (\$) 20	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3030 Piedmont El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Joshua W/Martha S. Hunt	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1101 Ballimore El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Evans Smith	7 Amount of contribution (\$) 250	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1613 Colano Road, Tyler, TX 75701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) Kystal Parker	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6300 Franklin Desert Dr, El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Marilyn S. Herrera	Amount of contribution (\$) 50	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 509 Thunderbnd #505, El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Frederick L. Francis	Amount of contribution (\$) 2,600	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 590 N. Mesa St, El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) J. Kirk Robinson	Amount of contribution (\$) 2,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4445 N. Mesa, Ste. 100, El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/18/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Uncommon, LLC	7 Amount of contribution (\$) 250	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 310 N. Mesa, third floor, suite 318 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Michael C. Wendt	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 10 Goodwin Dr El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jsha Rogers Babel	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1505 Rim Rd El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Jeffrey A. Laura D. Bolles	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1650 Janet Colles Ln El Paso, TX 79906		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Han K. Park	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8101 Gateway Blvd W, Ste. 270 El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/18/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Thomas Zaragoza	7 Amount of contribution (\$) 2,000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 6112 Pinehurst El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/18/2013	Full name of contributor ☐ out-of-state PAC (ID#) Alejandro Orozco	Amount of contribution (\$) 2,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5824 Cjo de Agila Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Robert A. Gonzalez	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1800 N. Stanton #603 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Oscar E. Venegas	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 516 Crossbend Ct, El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Ondasun LLC	Amount of contribution (\$) 5,000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 500 W. Overland Ave, Ste. 310 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/29/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Robert H. Jr. Rose Ann Hoy	7 Amount of contribution (\$) 2,000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 201 Villa Serena Ct El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/29/2013	Full name of contributor ☐ out-of-state PAC (ID#) Judy Mills Wandt	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 10 Goodwin Dr El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/30/2013	Full name of contributor ☐ out-of-state PAC (ID#) Bain Construction	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 14180 Blair Court Horizon City, TX 79928		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/20/2013	Full name of contributor ☐ out-of-state PAC (ID#) Clinton F. Cross	Amount of contribution (\$) 50	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 332 Thunderbird Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/20/2013	Full name of contributor ☐ out-of-state PAC (ID#) Joshua W. Martha S. Hunt	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1101 Baltimore Dr. El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 4/22/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Daniel Sierra	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 6746 Westwind El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/22/2013	Full name of contributor ☐ out-of-state PAC (ID#) Frederic P. Dalton	Amount of contribution (\$) 150	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2409 Savannah El Paso, TX 79920		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2013	Full name of contributor ☐ out-of-state PAC (ID#) El Paso Chapter AGC PAC	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4825 Ripley El Paso, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Brown Ranch	Amount of contribution (\$) 2000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 123 W. Mills Ave, Suite 810 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/2013	Full name of contributor ☐ out-of-state PAC (ID#) Scott D Weaver	Amount of contribution (\$) 2000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 123 W. Mills Ave, Suite 810 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) David P and Florence J Bachmueller	7 Amount of contribution (\$) 250	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 5817 Via Oresta El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/2013	Full name of contributor ☐ out-of-state PAC (ID#) Ralph E Seisinger	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1841 Saint Kleinfeld Apt 109 El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/2013	Full name of contributor ☐ out-of-state PAC (ID#) Paul Foster	Amount of contribution (\$) 5000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 123 W. Mills, Suite 200 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/2013	Full name of contributor ☐ out-of-state PAC (ID#) Charles Black Sr.	Amount of contribution (\$) 300	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8423 North Loop Dr El Paso, TX 79907		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/2013	Full name of contributor ☐ out-of-state PAC (ID#) Patrick V. Gorman	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 709 La Cruz El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortego		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/22/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Susan Rouse Moore	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 5501 N. Stanton St. Apt 1 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/22/13	Full name of contributor ☐ out-of-state PAC (ID#) Janis Jones Nickay	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5725 Oak Cliff Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/13	Full name of contributor ☐ out-of-state PAC (ID#) Leonard Noidelt	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5160 Memory Dr El Paso, TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/13	Full name of contributor ☐ out-of-state PAC (ID#) Patricia Babal	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1505 Rijn Road El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/13	Full name of contributor ☐ out-of-state PAC (ID#) Isha Babal	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1505 Rijn Road El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 49	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-23-13	5 Full name of contributor ☐ out-of-state PAC (ID#) Adam Corrado	7 Amount of contribution (\$) 25	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
6 Contributor address: City: State: Zip Code 1400 Greenwich Apt 9 San Francisco, CA 94109			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-23-13	Full name of contributor ☐ out-of-state PAC (ID#) Patricia Madril	Amount of contribution (\$) 50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address: City: State: Zip Code 1318 N. Oregon El Paso, TX 79902			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-23-2012	Full name of contributor ☐ out-of-state PAC (ID#) Miguel Mendez	Amount of contribution (\$) 25	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address: City: State: Zip Code 3020 McKulley El Paso, TX 79930			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-23-13	Full name of contributor ☐ out-of-state PAC (ID#) Maria Strober	Amount of contribution (\$) 250	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address: City: State: Zip Code 12532 Tigra China Ct. El Paso, TX 79938			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-23-2013	Full name of contributor ☐ out-of-state PAC (ID#) Gregory Tribovitsch	Amount of contribution (\$) 250	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Contributor address: City: State: Zip Code 1700 Calle Diva El Paso, TX 79902			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-24-13	5 Full name of contributor ☐ out-of-state PAC (ID#) Michael Guerra	7 Amount of contribution (\$) 70	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 408 Cincinnati El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-25-13	Full name of contributor ☐ out-of-state PAC (ID#) Clarence Ansley	Amount of contribution (\$) 30	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1125 E Robinson El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-25-13	Full name of contributor ☐ out-of-state PAC (ID#) Ann Horak	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 617 Cincinnati El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-25-2013	Full name of contributor ☐ out-of-state PAC (ID#) Mehrdad Moayed	Amount of contribution (\$) 2500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1221 N I-35E, Ste 200 Carrollton, TX 75006		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-26-13	Full name of contributor ☐ out-of-state PAC (ID#) HINTB Holdings LTD PAC	Amount of contribution (\$) 2500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 715 Kirk Dr Kansas City, MO 64105		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 48	
2 FILER NAME Stova Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-26-13	5 Full name of contributor ☐ out-of-state PAC (ID#) Amador O/Elizabeth Leal	7 Amount of contribution (\$) 300	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1304 Rancho Grande El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-26-13	Full name of contributor ☐ out-of-state PAC (ID#) Robert/Sylvia Ortega	Amount of contribution (\$) 600	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1305 Lonestar El Paso, TX 79925		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-26-13	Full name of contributor ☐ out-of-state PAC (ID#) William Sanders	Amount of contribution (\$) 2000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 201 E. Main Ste 350 El Paso TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-26-13	Full name of contributor ☐ out-of-state PAC (ID#) Alon Sema	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 395 Cora Pl. El Paso, TX 79915		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-26-13	Full name of contributor ☐ out-of-state PAC (ID#) Sullivan Public Affairs	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8705 Creston Cove Austin, TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 46	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-29-13	5 Full name of contributor ☐ out-of-state PAC (ID#) Larry Gentilello	7 Amount of contribution (\$) 100	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1618 S Street #204 Sacramento, CA 95811		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-29-13	Full name of contributor ☐ out-of-state PAC (ID#) Virginia Martinez	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 724 Cheltenham Dr. El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-29-13	Full name of contributor ☐ out-of-state PAC (ID#) Rachel Nedow	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1091 Los Jardines El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-23-2013	Full name of contributor ☐ out-of-state PAC (ID#) Mary L. Comoreno	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 501 E. Hagus El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-24-13	Full name of contributor ☐ out-of-state PAC (ID#) Elmer G. Elizabeth M. Ellis	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 6400 Tyler, TX 75711		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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5/3/2013 3:40:29 PM

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 46	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-29-13	5 Full name of contributor ☐ out-of-state PAC (ID#) Joe/Renee Jimenez 6 Contributor address: City: State: Zip Code 325 Vista Del Rey El Paso, TX 79912	7 Amount of contribution (\$) 260	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 4-30-13	Full name of contributor ☐ out-of-state PAC (ID#) Dexter Katzman Contributor address: City: State: Zip Code 11411 Whisper Dawn San Antonio, TX 78230	Amount of contribution (\$) 250	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-30-13	Full name of contributor ☐ out-of-state PAC (ID#) John and Denise Arriaga Contributor address: City: State: Zip Code 6337 Franklin Ridge El Paso, TX 79912	Amount of contribution (\$) 50	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-30-13	Full name of contributor ☐ out-of-state PAC (ID#) Vanessa Sandoval Contributor address: City: State: Zip Code 9435 Diana #1309 El Paso, TX 79924	Amount of contribution (\$) 5	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-30-13	Full name of contributor ☐ out-of-state PAC (ID#) Ricardo Mora Contributor address: City: State: Zip Code 416 Hogue Rd El Paso, TX 79902	Amount of contribution (\$) 100	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

48

2 FILER NAME

Steve Ortega

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/29/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jody Casey

6 Contributor address; City; State; Zip Code

1000 Madeline El Paso, TX 79902

7 Amount of contribution (\$)

200

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

4-29-2013

Full name of contributor

☐ out-of-state PAC (ID#)

Paul Haupt

Contributor address; City; State; Zip Code

10813 Vista Lomas Dr

Amount of contribution (\$)

10

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5-1-2013

Full name of contributor

☐ out-of-state PAC (ID#)

Maxey Scherr

Contributor address; City; State; Zip Code

1 Texas Tower 109 N. Oregon 12th Fl, El Paso, TX 79901

Amount of contribution (\$)

529.50

In-kind contribution description (if applicable)

Phone Bank Event

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/22/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Maria F. Teran

Contributor address; City; State; Zip Code

4804 Villa Encanto El Paso, TX 79922

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/16/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Thomas J. Vaughn

Contributor address; City; State; Zip Code

5223 Holly Bellaire, TX 77401

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/27/2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Michael W. Vaughn	7 Amount of contribution (\$) 1,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1802 Contant Houston TX 77008		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor ☐ out-of-state PAC (ID#) William F. Vaughn	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10355 Westpark Dr Houston TX 77042		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/24/2013	Full name of contributor ☐ out-of-state PAC (ID#) Michael W. Headler, C. Simpson	Amount of contribution (\$) 1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12006 Hornewood Ln Houston, TX 77024		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/2013	Full name of contributor ☐ out-of-state PAC (ID#) Joe Moody Campaign	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 920927 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/15/2013	Full name of contributor ☐ out-of-state PAC (ID#) Stephanie Karr	Amount of contribution (\$) 75	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO Box 288 El Paso, TX 79943		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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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: 48	
2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-21-2013	5 Full name of contributor ☐ out-of-state PAC (ID#) Martin Morgadas	7 Amount of contribution (\$) 500	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 5100 Hunters Glen Court Unit B El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4-29-2013	Full name of contributor ☐ out-of-state PAC (ID#) Dan Longoria	Amount of contribution (\$) 3450	In-kind contribution description (if applicable) advertising expense
Contributor address: City: State: Zip Code 7840 Picacho Hills El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-22-2013	Full name of contributor ☐ out-of-state PAC (ID#) Candley Thompson	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 401 Black Wolf Run Austin, TX 78705		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-21-2013	Full name of contributor ☐ out-of-state PAC (ID#) Deborah Kastrin	Amount of contribution (\$) 200	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3940 Fleming El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-17-2013	Full name of contributor ☐ out-of-state PAC (ID#) Susana M / Stephen L	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6632 Imperial Ridge Dr El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

48

2 FILER NAME

Steve Ortega

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/15/2013

5 Full name of contributor

☐ out-of-state PAC (ID#)

Peter A. Spier

6 Contributor address; City; State; Zip Code

1621 Camino Bello El Paso, TX 79902

7 Amount of contribution (\$)

500

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

4/17/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Marie Carawan

Contributor address; City; State; Zip Code

11653 Andrienne Dr. El Paso, TX 79936

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/22/2013

Full name of contributor

☐ out-of-state PAC (ID#)

Gayle Hunt

Contributor address; City; State; Zip Code

PO Box 12220 El Paso, TX 79913

Amount of contribution (\$)

2500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18/2013

Full name of contributor

☐ out-of-state PAC (ID#)

S&B PAC

Contributor address; City; State; Zip Code

PO Box 266245 Houston, TX 77207

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 0	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filters)	
4 TOTAL OF UNITEMIZED PLEDGES:		\$	
5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#)	8 Amount of pledge (\$)	9 In-kind description (if applicable)
7 Pledgor address: City: State: Zip Code		(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#)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address: City: State: Zip Code		(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#)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address: City: State: Zip Code		(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#)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address: City: State: Zip Code		(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#)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address: City: State: Zip Code		(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#)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address: City: State: Zip Code		(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: 0	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS: \$			
5 Date of loan	7 Name of lender ☐ out-of-state PAC (ID# _____)	9 Loan Amount (\$)	
6 Is lender a financial institution? Y N	8 Lender address: City: State: Zip Code	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	Name of lender ☐ out-of-state PAC (ID# _____)	Loan Amount (\$)	
Is lender a financial institution? Y N	Lender address: City: State: Zip Code	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.

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Stovo Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/2/2013		5 Payee name Stanton Street Technology			
6 Amount (\$) \$227.32		7 Payee address; City; State; Zip Code 500 W. Overland, El Paso, TX 79901			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Tech services		(b) Description (If travel outside of Texas, complete Schedule T) Web-related services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/2/2013		Payee name Forma Group			
Amount (\$) \$3,000.00		Payee address; City; State; Zip Code 391 E. San Antonio Ste. B201, El Paso, TX 79901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/3/2013		Payee name Forma Group			
Amount (\$) \$20,580.00		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 Expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/5/2013		Payee name Costco			
Amount (\$) \$22.74		Payee address; City; State; Zip Code 6101 Gateway West Blvd El Paso, TX 79925			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/5/2013		5 Payee name Target			
6 Amount (\$) \$27.51		7 Payee address; City; State; Zip Code 6101 Gateway West Blvd., El Paso, TX 79925			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(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 4/5/2013		Payee name Art Fierro Campaign			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 11612 Tony Tejada Dr., El Paso, TX 79936			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Donation made by candidate		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Arturo Peter Fierro		Office sought EPCC District 8 Trustee	Office held EPCC District 6 Trustee
Date 4/6/2013		Payee name Walmart			
Amount (\$) \$7.78		Payee address; City; State; Zip Code 1551 N Zaragoza Rd El Paso, TX 79936			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage 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
Date 4/8/2013		Payee name AT&T			
Amount (\$) \$135.67		Payee address; City; State; Zip Code 2701 N. Mesa El Paso, TX 79902			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Phone service		Description (If travel outside of Texas, complete Schedule T) Campaign phone	
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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/11/2013	5 Payee name Adam Pena		
6 Amount (\$) \$1,000	7 Payee address; City; State; Zip Code 500 W. Overland, Ste. 250K, El Paso TX 79901		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages - Campaign services	(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 4/11/2013	Payee name Baracuda Consulting		
Amount (\$) \$1,400	Payee address; City; State; Zip Code 2209 Paisburg El Paso, TX 79939		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting	Description (If travel outside of Texas, complete Schedule T) Consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 4/10/2013	Payee name Proper Printing		
Amount (\$) \$703.83	Payee address; City; State; Zip Code 500 W Paisano, Ste. C El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing expense	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 4/11/2013	Payee name Foima Group		
Amount (\$) \$101,000	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) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Broadcast media purchases	
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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/17/2013	5 Payee name: The Station Urban Offices		
6 Amount (\$) \$1,400	7 Payee address; City; State; Zip Code 500 W. Overland El Paso, TX 79901		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Rental expense	(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name: Office sought: Office held:			
Date 4/21/2013	Payee name Costco		
Amount (\$) \$241.28	Payee address; City; State; Zip Code 6101 Gateway West Blvd El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/beverage expense	Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name: Office sought: Office held:			
Date 4/22/2013	Payee name AT&T		
Amount (\$) \$165.54	Payee address; City; State; Zip Code 2701 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Phone services	Description (If travel outside of Texas, complete Schedule T) Campaign phone	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name: Office sought: Office held:			
Date 4/23/2013	Payee name City of El Paso Parks & Recreation		
Amount (\$) \$142.00	Payee address; City; State; Zip Code 901 N. Virginia El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description (If travel outside of Texas, complete Schedule T) Fees & rental for park usage during event	
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Steve Ortega	3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Payee name: The Station Urban Offices		
6 Amount (\$) \$1,400	7 Payee address; City; State; Zip Code 500 W. Overland El Paso, TX 79901		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Rental expense	(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____			
Date 4/21/2013	Payee name Costco		
Amount (\$) \$241.28	Payee address; City; State; Zip Code 6101 Gateway West Blvd El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/beverage expense	Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____			
Date 4/22/2013	Payee name AT&T		
Amount (\$) \$165.54	Payee address; City; State; Zip Code 2701 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Phone services	Description (If travel outside of Texas, complete Schedule T) Campaign phone	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____			
Date 4/22/2013	Payee name City of El Paso Parks & Recreation		
Amount (\$) \$142.00	Payee address; City; State; Zip Code 901 N. Virginia El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description (If travel outside of Texas, complete Schedule T) Fees & rental for park usage during event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____			
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 2013 MAY 16 PM 5:1

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5/3/2013 3:40:29 PM

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Arduino's Desert Crossing		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/24/2013		5 Payee name Arduino's Desert Crossing			
6 Amount (\$) \$3,257.08		7 Payee address; City; State; Zip Code 1 Arduino's Drive, Sunbird Park, NM 88083			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event expense		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/24/2013		Payee name Forma Group			
Amount (\$) \$20,580.00		Payee address; City; State; Zip Code 501 E. San Antonio, Ste. B201, El Paso, TX 79901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/26/2013		Payee name Jorge Calleja Design Services			
Amount (\$) \$48.00		Payee address; City; State; Zip Code 500 W Overland, Ste 250, El Paso, TX 79901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/12/2013		Payee name Sam's Club			
Amount (\$) \$73.12		Payee address; City; State; Zip Code 7970 N. Mesa St, El Paso, TX 79932			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/beverage expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/28/2013		5 Payee name Pizza Hut			
6 Amount (\$) \$102.69		7 Payee address; City; State; Zip Code 2915 N. Mesa, El Paso, TX 79902			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food and Beverage Expense		(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 4/29/2013		Payee name Enterprise Rent-A-Car			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 5710 Montana Ave, El Paso, TX 79925			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Rental 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	
Date 4/29/2013		Payee name A Taller Earth Productions			
Amount (\$) 430.00		Payee address; City; State; Zip Code 1407 Devonshire, El Paso, TX 79925			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Rental Expense		Description (If travel outside of Texas, complete Schedule T) Campaign Event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/30/2013		Payee name David's Pennants and Banners			
Amount (\$) \$243.56		Payee address; City; State; Zip Code 9911 Carnegie El Paso, TX 79925			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Campaign Signs	
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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel in District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/30/2013		5 Payee name Forma Group			
6 Amount (\$) \$40,350.00		7 Payee address; City; State; Zip Code 301 E. San Antonio, Ste. B201, El Paso 79901			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Consulting		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 5/1/2013		Payee name Barracuda Consulting			
Amount (\$) \$3,340.87		Payee address; City; State; Zip Code 2209 Palsburg, El Paso, TX 79950			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 5/1/2013		Payee name Adam Pena			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 500 W. Overland, Ste. 250C, El Paso, TX 79901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/wages		Description (If travel outside of Texas, complete Schedule T) Campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 5/1/2013		Payee name Santon Street Technology			
Amount (\$) \$113.66		Payee address; City; State; Zip Code 500 W. Overland, Ste. 200, El Paso, TX 79901			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Tech services		Description (If travel outside of Texas, complete Schedule T) Web related services	
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Sawa Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/1/2013		5 Payee name Luigi's Pizza			
6 Amount (\$) \$31.04		7 Payee address; City: State: Zip Code 321 E Mills Ave, El Paso, TX 79901			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage expense		(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 4/2/2013		Payee name PayPal			
Amount (\$) \$15.30		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		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 4/3/2013		Payee name Paypal			
Amount (\$) \$145.30		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		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 4/10/2013		Payee name Paypal			
Amount (\$) \$83.93		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/9/2013		5 Payee name PayPal			
6 Amount (\$) \$145.30		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) Fees for contribution		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/15/2013		Payee name PayPal			
Amount (\$) \$74.33		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/17/13		Payee name PayPal			
Amount (\$) \$92.57		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/23/2013		Payee name PayPal			
Amount (\$) \$30.53		Payee address; City: State: Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME PayPal		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/25/2013		5 Payee name			
6 Amount (\$) 80.45		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) Fees for contribution		(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 4/30/2013		Payee name PayPal			
Amount (\$) 81.14		Payee address; City; State; Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees for contribution		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
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
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
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Steve Ortega		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/4/2013		5 Payee name Paypal			
6 Amount (\$) \$145.30		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) Credit Card Fees for Contribution		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/23/2013		Payee name Paypal			
Amount (\$) \$1.03		Payee address; City; State; Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Credit Card Fees for Contributions		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/8/2013		Payee name Constant Contact			
Amount (\$) 37.31		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) Technology Services		Description (If travel outside of Texas, complete Schedule T) Email outreach	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/15/2013		Payee name Paypal			
Amount (\$) \$30		Payee address; City; State; Zip Code 1-800-852-1973			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees For Contributions		Description (If travel outside of Texas, complete Schedule T) Monthly Service Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 0		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date		5 Payee name			
6 Amount (\$)		7 Payee address; City; State; Zip Code			
☐ Reimbursement from political contributions intended					
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 (\$)		Payee address; City; State; Zip Code			
☐ Reimbursement from political contributions intended					
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 (\$)		Payee address; City; State; Zip Code			
☐ Reimbursement from political contributions intended					
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 (\$)		Payee address; City; State; Zip Code			
☐ Reimbursement from political contributions intended					
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

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SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H: 0	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:
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

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SCHEDULE I

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule I: 0	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: 0
2 FILER NAME		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 7 Purpose for which amount is received	8 Amount (\$)
Date	Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code Purpose for which amount is received	Amount (\$)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT.

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 0
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	
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	Departure city or name of departure location	
	Destination city or name of destination location	
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

 CITY CLERK DEPT.
 2011 MAR 16 PM 1:52

**CANDIDATE / OFFICEHOLDER REPORT
DESIGNATION OF FINAL REPORT**

CITY CLERK DEPT.

3/2/2013 3:40:29 PM

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