

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>			
	MS	VERONICA					
	NICKNAME	LAST	SUFFIX	Date Received			
	VERO	CARBAJAL		10/5/2020 12:30:45 PM			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	3016 WHEELING AVENUE		EL PASO				
	TX	79930					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
	( 915 )	490-9463					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$		
	MS	EMMA	C				
	NICKNAME	LAST	SUFFIX	Date Processed			
	KITTY	SPALDING		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	929 BLANCHARD AVENUE		EL PASO				
	TX	79902					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(915 )	5323731					
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	07	01	2020	THROUGH	10	05	2020
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	11	03	2020	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				MAYOR OF EL PASO			

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**14 C/OH NAME**  
MS VERONICA CARBAJAL

**15 Filer ID** (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.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 44,419.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 20378.69
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 9259.34
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**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.

**VERONICA CARBAJAL**  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said VERONICA CARBAJAL, this the 5 day of October, 2020, to certify which, witness my hand and seal of office.

**Mary Katz**  
\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

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# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

MS VERONICA CARBAJAL

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30,739.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,580.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 20,378.69
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor

AARON TORRES

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

601 N OREGON, #309, El Paso TX 79901

**7** Amount of contribution (\$)

60

**8** Principal occupation / Job title (See Instructions)

CLOTHING DESIGNER

**9** Employer (See Instructions)

SELF

Date

07/24/2020

Full name of contributor

ADRIAN MONTENEGRO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11908 OAK CROSSING DRIVE, El Paso TX 79936

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

SALES ASSOCIATE

Employer (See Instructions)

FOLLETT

Date

09/05/2020

Full name of contributor

ADRIAN MONTENEGRO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11908 OAK CROSSING, El Paso TX 79936

Amount of contribution (\$)

5

Principal occupation / Job title (See Instructions)

SALES ASSOCIATE

Employer (See Instructions)

FOLLETT

Date

09/13/2020

Full name of contributor

ADRIAN SAENZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

8529 WINCHESTER, El Paso TX 79907

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

HOME HEALTH CARE

Employer (See Instructions)

JMJ HOME HEALTH

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

09/05/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**ADRIANA CADENA**

6 Contributor address; City; State; Zip Code

**6329 NATALICIO, EL PASO TX 79912**

7 Amount of contribution (\$)

**40**

8 Principal occupation / Job title (See Instructions)

**COMMUNITY OUTREACH**

9 Employer (See Instructions)

**UMC**

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**ADRIANA PEREZ**

Contributor address; City; State; Zip Code

**912 N. LEE, APT 2, EI Paso TX 79902**

Amount of contribution (\$)

**30**

Principal occupation / Job title (See Instructions)

**POLICY & ADVOCACY STRATEGIST**

Employer (See Instructions)

**ACLU**

Date

08/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**ALBERTO MESTA**

Contributor address; City; State; Zip Code

**1206 MESITA, EI Paso TX 79902**

Amount of contribution (\$)

**50**

Principal occupation / Job title (See Instructions)

**ATTORNEY**

Employer (See Instructions)

**SELF**

Date

08/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**ALDO LOPEZ**

Contributor address; City; State; Zip Code

**460 FERRARA CT, POMONA CA 91766**

Amount of contribution (\$)

**60**

Principal occupation / Job title (See Instructions)

**PROFESSOR**

Employer (See Instructions)

**SADDLEBACK COLLEGE**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/19/2020

**5** Full name of contributor

ALDO MASPONS

**6** Contributor address;

3008 PIEDMONT, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

PHYSICIAN

**9** Employer (See Instructions)

MASPONS PEDIATRIC

Date

09/19/2020

Full name of contributor

ALEGRE RODRIGUEZ

Contributor address;

626 MALTMAN AVE, Los Angeles CA 90026

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

STORY ANALYST

Employer (See Instructions)

NBC UNIVERSAL

Date

07/22/2020

Full name of contributor

ALEJANDRINA E. GONZALEZ

Contributor address;

20311 CYPRESS POLL DR, CYPRESS TX 77433

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/01/2020

Full name of contributor

ALEJANDRINA GONZALEZ

Contributor address;

20311 CYPRESS POLL, CYPRESS TX 77433

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/04/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALEJANDRO MONTOYA

**6** Contributor address; City; State; Zip Code

249 COLUMBIA, EI Paso TX 79907

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALEX MAYER

Contributor address; City; State; Zip Code

800 MISSISSIPPI, EI Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

PROFESSOR & DIRECTOR

Employer (See Instructions)

UTEP

Date

09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALEXA TELLES

Contributor address; City; State; Zip Code

8601 METTLER, EL PASO TX 79925

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/01/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALFONSO PACHECO

Contributor address; City; State; Zip Code

3046 OAK CREST CIRCLE, EI Paso TX 79936

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

RESEARCH ASSISTANT

Employer (See Instructions)

UTEP

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/02/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALISON WESTERMANN

**6** Contributor address; City; State; Zip Code

6756 DAKOTA RIDGE, El Paso TX 79912

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

ADMINISTRATOR

**9** Employer (See Instructions)

BORDERLAND RAINBOW CENTER

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALMA RICO

Contributor address; City; State; Zip Code

2020 N KANSAS, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

EDUCATION MANAGEMENT

Employer (See Instructions)

CSGF

Date

09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALONZO MENDOZA

Contributor address; City; State; Zip Code

1416 PINTORESCO, EL PASO TX 79935

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

UNION ORGANIZER

Employer (See Instructions)

TSTA

Date

07/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ALONZO MENDOZA

Contributor address; City; State; Zip Code

1416 PINTORESCO DR, EL PASO TX 79935

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

UNION ORGANIZER

Employer (See Instructions)

TSTA

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date  
  
08/15/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ALONZO RENE MENDOZA

6 Contributor address; City; State; Zip Code  
1416 PINTORESCO DR, EL PASO TX 79935

7 Amount of contribution (\$)  
  
20

8 Principal occupation / Job title (See Instructions)  
UNION ORGANIZER

9 Employer (See Instructions)  
TSTA

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
AMANDA SAUCEDO

Contributor address; City; State; Zip Code  
630 TURNEY, EI Paso TX 79902

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
  
09/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
AMY LIEBMAN

Contributor address; City; State; Zip Code  
218 N CLAIRMONT, SALISBURY MD 21801

Amount of contribution (\$)  
  
50

Principal occupation / Job title (See Instructions)  
HEALTH WORKER

Employer (See Instructions)  
MCN

Date  
  
09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
AMY SOMMERS

Contributor address; City; State; Zip Code  
5738 E GREEN LAKE WAY NORTH, SEATTLE WA 981

Amount of contribution (\$)  
  
100

Principal occupation / Job title (See Instructions)  
RETIRED

Employer (See Instructions)  
NA

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/08/2020

**5** Full name of contributor

ANA FUENTES

**6** Contributor address;

6768 COPPER RIDGE, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

RESEARCH ASSISTANT

**9** Employer (See Instructions)

UTEP

Date

08/15/2020

Full name of contributor

ANA L. REZA

Contributor address;

9133 CUERNAVACA, El Paso TX 79907

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

200

Principal occupation / Job title (See Instructions)

BRIDGE CHAPLAIN

Employer (See Instructions)

EPISCOPAL DIOCESE OF Rio Grande

Date

09/04/2020

Full name of contributor

ANA REZA

Contributor address;

9133 CUERNAVACA, El Paso TX 79907

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/27/2020

Full name of contributor

ANA REZA

Contributor address;

9133 CUERNAVACA, El Paso TX 79907

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

CHAPLAIN

Employer (See Instructions)

EPISCOPAL DIOCESE OF Rio Grande

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANA REZA

**6** Contributor address; City; State; Zip Code  
9133 CUERNAVACA DR, El Paso TX 79907

**7** Amount of contribution (\$)  
20

**8** Principal occupation / Job title (See Instructions)  
CHAPLAIN

**9** Employer (See Instructions)  
EPISCOPAL DIOCESE OF Rio Grande

Date  
07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANAHI PONCE

Contributor address; City; State; Zip Code  
4625 SUN VALLEY, El Paso TX 79924

Amount of contribution (\$)  
10

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANAHI PONCE

Contributor address; City; State; Zip Code  
4625 SUN VALLEY, El Paso TX 79924

Amount of contribution (\$)  
5

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
08/12/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANALINDA MORENO

Contributor address; City; State; Zip Code  
510 E UNIVERSITY, El Paso TX 79902

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
RETIRED

Employer (See Instructions)  
NA

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
09/13/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANAPAUULA THEMANN

**6** Contributor address; City; State; Zip Code  
200 E CASTELLANO, EL PASO TX 79912

**7** Amount of contribution (\$)  
  
20

**8** Principal occupation / Job title (See Instructions)  
STUDENT

**9** Employer (See Instructions)  
UTEP

Date  
  
08/01/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANAPAUULA THEMANN

Contributor address; City; State; Zip Code  
200 E CASTELLANO, EL PASO TX 79902

Amount of contribution (\$)  
  
10

Principal occupation / Job title (See Instructions)  
RESEARCH ASSISTANT

Employer (See Instructions)  
UTEP

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANASTASIA ZAVALA

Contributor address; City; State; Zip Code  
423 FRANCIS ST, El Paso TX 79905

Amount of contribution (\$)  
  
50

Principal occupation / Job title (See Instructions)  
RETIRED

Employer (See Instructions)  
NA

Date  
  
07/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANDREA TIRRES

Contributor address; City; State; Zip Code  
3401 HIXSON, El Paso TX 79902

Amount of contribution (\$)  
  
70

Principal occupation / Job title (See Instructions)  
EDUCATOR

Employer (See Instructions)  
UTEP

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor

ANDRES SEGURA

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

3657 TIERRA BERLIN, EL PASO TX 79936

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/22/2020

Full name of contributor

ANDREW MARTINEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1311 N KANSAS, EI Paso TX 79902

Amount of contribution (\$)

5

Principal occupation / Job title (See Instructions)

WAITER

Employer (See Instructions)

JEFFREY'S OF AUSTIN

Date

08/15/2020

Full name of contributor

ANGEL ULLOA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

724 ESPOLON, EL PASO TX 79913

Amount of contribution (\$)

44

Principal occupation / Job title (See Instructions)

ASSOCIATE PAYROLL SPECIALIST

Employer (See Instructions)

ADP

Date

08/03/2020

Full name of contributor

ANN F, KRUZICH

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3202 OLD SPANISH TRAIL, EI Paso TX 79904

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/04/2020

**5** Full name of contributor

ANNIE MCALMON

**6** Contributor address;

408 BLACKER, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State; Zip Code

**7** Amount of contribution (\$)

250

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

07/27/2020

Full name of contributor

ANNIE MCALMON

Contributor address;

408 BLACKER, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State; Zip Code

Amount of contribution (\$)

110

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor

ANTHONY CORTEZ

Contributor address;

8205 DEMPSEY, El Paso TX 79925

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State; Zip Code

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/05/2020

Full name of contributor

ANTONIA MORALES

Contributor address;

323 CHIHUAHUA, El Paso TX 79901

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State; Zip Code

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

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City Clerk Dept.  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/20/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ANTONIO CORTEZ

**6** Contributor address; City; State; Zip Code

947 GOMEZ RD, El Paso TX 79932

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ARMIDA ESTRADA

Contributor address; City; State; Zip Code

4333 SANTA RITA, El Paso TX 79902

Amount of contribution (\$)

200

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ARTURO DOMINGUEZ

Contributor address; City; State; Zip Code

3948 Las Vegas, El Paso TX 79912

Amount of contribution (\$)

200

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/29/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ASHA DANIEL

Contributor address; City; State; Zip Code

300 W SKYVIEW, AUSTIN TX 78752

Amount of contribution (\$)

150

Principal occupation / Job title (See Instructions)

COMMUNITY ENGAGEMENT COORDINATOR

Employer (See Instructions)

UT-AUSTIN

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/03/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ASHLEY MARTINEZ

**6** Contributor address; City; State; Zip Code

4461/2A AVENUE, CORONADO CA 92118

**7** Amount of contribution (\$)

15

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

08/28/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

AUDRIANA APODACA

Contributor address; City; State; Zip Code

521 COTTON BLOSSOM, EI Paso TX 79922

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NURSE PRACTITIONER

Employer (See Instructions)

LCDF

Date

09/10/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

AUROLYN LUYKX

Contributor address; City; State; Zip Code

4570 BRIGHTON LN, EI Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

UTEP

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Aaron Montes

Contributor address; City; State; Zip Code

11607 PELLICANO, EL PASO TX 79936

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

SELF

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
09/08/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BARBARA FERRY

**6** Contributor address; City; State; Zip Code  
5876 MCBRYDE, RICHMOND CA 94805

**7** Amount of contribution (\$)  
25

**8** Principal occupation / Job title (See Instructions)  
ATTORNEY

**9** Employer (See Instructions)  
FELTON & SOLARIO

Date  
08/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BEN BASS

Contributor address; City; State; Zip Code  
3501 HUECO AVE, EI Paso TX 79903

Amount of contribution (\$)  
100

Principal occupation / Job title (See Instructions)  
ADMINISTRATION

Employer (See Instructions)  
EI Paso ALLIANCE

Date  
07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BEN STEVENSON

Contributor address; City; State; Zip Code  
932 WEST BORDERLAND, EI Paso TX 79932

Amount of contribution (\$)  
30

Principal occupation / Job title (See Instructions)  
PLANT MECHANIC

Employer (See Instructions)  
XTO ENERGY

Date  
09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BERNADETTE SILVA

Contributor address; City; State; Zip Code  
4744 LOMA DE PLATA, EI Paso TX 79934

Amount of contribution (\$)  
25

Principal occupation / Job title (See Instructions)  
GRAPHIC DESIGNER

Employer (See Instructions)  
SELF

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# MONETARY POLITICAL CONTRIBUTIONS

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/20/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BERNADETTE SILVA

**6** Contributor address; City; State; Zip Code

4744 LOMA DE PLATA, El Paso TX 79934

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

GRAPHIC DESIGNER

**9** Employer (See Instructions)

SELF

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BERNIE CARILLO

Contributor address; City; State; Zip Code

El Paso TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

MIDWIFE

Employer (See Instructions)

NA

Date

07/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BIANCA SANCHEZ

Contributor address; City; State; Zip Code

3518 RICHMOND, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

SUBSTITUTE TEACHER

Employer (See Instructions)

EPISD

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BIANCA SANCHEZ

Contributor address; City; State; Zip Code

3518 RICHMOND, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

SUBSTITUTE TEACHER

Employer (See Instructions)

EPISD

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
07/22/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BLANCA ENRIQUEZ  
**6** Contributor address; City; State; Zip Code  
1391 WHIRLAWAY, EL PASO TX 79936

**7** Amount of contribution (\$)  
50

**8** Principal occupation / Job title (See Instructions)  
Vice President

**9** Employer (See Instructions)  
URBAN STRATEGIES

Date  
08/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BLANCA ENRIQUEZ  
Contributor address; City; State; Zip Code  
1391 WHIRLAWAY, EL PASO TX 79936

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
Vice President

Employer (See Instructions)  
URBAN STRATEGIES

Date  
09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BLANCA ENRIQUEZ  
Contributor address; City; State; Zip Code  
1391 WHIRLAWAY, EL PASO TX 79936

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
Vice President

Employer (See Instructions)  
URBAN STRATEGIES

Date  
07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BRAD JACOBSON  
Contributor address; City; State; Zip Code  
4769 EXCALIBUR, EI Paso TX 79902

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
EDUCATOR

Employer (See Instructions)  
UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/21/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRANDON CARRILLO

**6** Contributor address; City; State; Zip Code

1500 N STANTON, El Paso TX 79902

**7** Amount of contribution (\$)

500

**8** Principal occupation / Job title (See Instructions)

WEB DESIGNER

**9** Employer (See Instructions)

APARTMENT IDEAS

Date

09/01/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIAN GIZA

Contributor address; City; State; Zip Code

PO Box 13386, El Paso TX 79913

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

FACULTY

Employer (See Instructions)

UTEP

Date

08/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIAN SIEVE

Contributor address; City; State; Zip Code

5515 ALABAMA, El Paso TX 79904

Amount of contribution (\$)

44

Principal occupation / Job title (See Instructions)

PASTOR

Employer (See Instructions)

MCC

Date

07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIAN SIEVE

Contributor address; City; State; Zip Code

5515 ALABAMA, El Paso TX 79904

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

PASTOR

Employer (See Instructions)

METROPOLITAN COMMUNITY CHURCH

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/16/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIAN SIEVE

**6** Contributor address; City; State; Zip Code

5515 ALABAMA, El Paso TX 79904

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

PASTOR

**9** Employer (See Instructions)

MCC El Paso

Date

08/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIANA MARTINEZ

Contributor address; City; State; Zip Code

12949 EAST BROOK, El Paso TX 79938

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

SPEECH PATHOLOGIST

Employer (See Instructions)

SISD

Date

08/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIANA MARTINEZ

Contributor address; City; State; Zip Code

12949 EAST BROOK, El Paso TX 79938

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

SPEECH PATHOLOGIST

Employer (See Instructions)

SISD

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

BRIANA STONE

Contributor address; City; State; Zip Code

210 ROSEMARY HOLLOW, BUDA TX 78610

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

STATE AGENCY

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
07/08/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BRIANA STONE

**6** Contributor address; City; State; Zip Code  
210 ROSEMARY HOLLOW, BUDA TX 78610

**7** Amount of contribution (\$)  
50

**8** Principal occupation / Job title (See Instructions)  
ATTORNEY

**9** Employer (See Instructions)  
STATE AGENCY

Date  
09/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BRIANA STONE

Contributor address; City; State; Zip Code  
210 ROSEMARY HOLLOW, BUDA TX 78610

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
ATTORNEY

Employer (See Instructions)  
STATE AGENCY

Date  
09/09/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BRIANA STONE

Contributor address; City; State; Zip Code  
210 ROSEMARY HOLLOW, BUDA TX 78610

Amount of contribution (\$)  
45

Principal occupation / Job title (See Instructions)  
ATTORNEY

Employer (See Instructions)  
STATE BAR OF TEXAS

Date  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
BRITTANY MEDELLIN

Contributor address; City; State; Zip Code  
13009 STONINGTON LANE, EL PASO TX 79938

Amount of contribution (\$)  
15

Principal occupation / Job title (See Instructions)  
OUTREACH FACILITATOR

Employer (See Instructions)  
CASFV

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/19/2020

**5** Full name of contributor

BRYAN MONROE

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

10316 BON AIRE DR, El Paso TX 79924

**7** Amount of contribution (\$)

5

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

08/19/2020

Full name of contributor

BRYAN MONROE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10316 BON AIRE, El Paso TX 79924

Amount of contribution (\$)

5

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/19/2020

Full name of contributor

BRYAN MONROE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10316 BONAIRE, El Paso TX 79924

Amount of contribution (\$)

5

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/07/2020

Full name of contributor

CAMILLE CARLOS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

317 DESERT GARDEN, SANTA TERESA NM 88008

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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City Clerk Dept.  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/07/2020

5 Full name of contributor

CAMILLE CARLOS

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

7557 LA CONTE, EL PASO TX 79912

7 Amount of contribution (\$)

10

8 Principal occupation / Job title (See Instructions)

SERVER

9 Employer (See Instructions)

CARLOS AND MICKEY'S

Date

09/04/2020

Full name of contributor

CANDACE PRINTZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2112 OCTUBRE, EL PASO TX 79935

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

ASSISTANT DIRECTOR OF FINE ARTS

Employer (See Instructions)

SISD

Date

09/16/2020

Full name of contributor

CARLOS ACEVES

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

PO Box 1921, CANUTILLO TX 79835

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

TUTOR

Employer (See Instructions)

CANUTILLO ISD

Date

07/20/2020

Full name of contributor

CARLOS CARDENAS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

717 E San Antonio, El Paso TX 79901

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/17/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARLOS HUMPHREYS

**6** Contributor address; City; State; Zip Code

2518 RICHMOND, El Paso TX 79930

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

LIBRARIAN

**9** Employer (See Instructions)

EPCC

Date

07/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARLOS HUMPHREYS

Contributor address; City; State; Zip Code

2518 RICHMOND AVE, El Paso TX 79930

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

LIBRARIAN

Employer (See Instructions)

EPCC

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARLOS HUMPHREYS

Contributor address; City; State; Zip Code

2518 RICHMOND, El Paso TX 79930

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

LIBRARIAN

Employer (See Instructions)

EPCC

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARLOS MARENTES

Contributor address; City; State; Zip Code

El Paso TX 79904

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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City Clerk Dept.  
10/5/2020 2:26:28 PM

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/13/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARLOS RODRIGUEZ

**6** Contributor address; City; State; Zip Code

2216 E MILLS, El Paso TX 79901

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

SELF

**9** Employer (See Instructions)

SELF

Date

07/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

07/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

08/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/07/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

**6** Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, EI Paso TX 79902

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

SELF

Date

09/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, EI Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

09/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, EI Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN RODRIGUEZ

Contributor address; City; State; Zip Code

1809 GEORGIA PLACE, EI Paso TX 79902

Amount of contribution (\$)

16

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/05/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN SANCHEZ

**6** Contributor address; City; State; Zip Code

11457 BUNKY HENRY LANE, EI Paso TX 79936

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/02/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CARMEN SANCHEZ

Contributor address; City; State; Zip Code

11457 BUNKY HENRY LANE, EI Paso TX 79936

Amount of contribution (\$)

45

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CAROL WESTON

Contributor address; City; State; Zip Code

7029 CASA LOMA CIR, EI Paso TX 79912

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/27/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CASSANDRA MCCRAE

Contributor address; City; State; Zip Code

657 W KINGSLEY, PHILADELPHIA PA 19144

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

EARTH JUSTICE

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/27/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CASSANDRA MCCRAE

**6** Contributor address; City; State; Zip Code

657 W KINGSLEY, PHILADELPHIA PA 19144

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

EARTH JUSTICE

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CASSIE TOULET-CRUMP

Contributor address; City; State; Zip Code

1200 BELVIDERE, EL PASO TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CATHERINE SOTELO

Contributor address; City; State; Zip Code

1814 SHREYA ST, El Paso TX 79928

Amount of contribution (\$)

85

Principal occupation / Job title (See Instructions)

ENVIRONMENT COMPLIANCE

Employer (See Instructions)

RESOLUTE COMPLIANCE

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CESAR GARCIA

Contributor address; City; State; Zip Code

500 ZEBY RD, El Paso TX 79927

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

DIESEL MECHANIC

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

07/14/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CHRISTINA GARCIA

6 Contributor address; City; State; Zip Code

504 AMUR WAY, EI Paso TX 79907

7 Amount of contribution (\$)

50

8 Principal occupation / Job title (See Instructions)

NA

9 Employer (See Instructions)

NA

Date

07/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CHRISTINA SANCHEZ

Contributor address; City; State; Zip Code

1420 CAMINO ALTO, EI Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

FILM MAKER

Employer (See Instructions)

MUVIMON STUDIO

Date

08/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CHRISTOPHER BENOIT

Contributor address; City; State; Zip Code

2700 LOUISVILLE, EI Paso TX 79930

Amount of contribution (\$)

75

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

LAW OFFICE OF LYNN COYLE

Date

09/11/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CLARA ACOSTA

Contributor address; City; State; Zip Code

10970 STACI LN, EI Paso TX 79927

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

LUBIN & ENOCH

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**08/15/2020**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**CLIFFORD KYLE JONES**

6 Contributor address; City; State; Zip Code

**1259 OHIO, El Paso TX 79930**

7 Amount of contribution (\$)

**44**

8 Principal occupation / Job title (See Instructions)

**ASSISTANT PROFESSOR**

9 Employer (See Instructions)

**UTEP**

Date

**08/05/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**CORINNE CHACON**

Contributor address; City; State; Zip Code

**1117 DEL NORTE ST, El Paso TX 79915**

Amount of contribution (\$)

**50**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**NA**

Date

**09/07/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**CRISTAL ACOSTA**

Contributor address; City; State; Zip Code

**14375 WOOD SUGAR, El Paso TX 79938**

Amount of contribution (\$)

**15**

Principal occupation / Job title (See Instructions)

**OWNER**

Employer (See Instructions)

**CLARITY El Paso**

Date

**09/22/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**CRISTINA DOMINGUEZ**

Contributor address; City; State; Zip Code

**814 LUISA, ANTHONY TX 79821**

Amount of contribution (\$)

**100**

Principal occupation / Job title (See Instructions)

**DIRECTOR**

Employer (See Instructions)

**LA SEMILLA FOOD CENTER**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
07/25/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**CRYSTAL MORAN**

**6** Contributor address; City; State; Zip Code  
**519 PROSPECT, El Paso TX 79902**

**7** Amount of contribution (\$)  
  
**25**

**8** Principal occupation / Job title (See Instructions)  
**PUBLIC HEALTH**

**9** Employer (See Instructions)  
**DSHS**

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**CRYSTAL ROBINSON**

Contributor address; City; State; Zip Code  
**14904 BRANDON WOLFRAM, El Paso TX 79934**

Amount of contribution (\$)  
  
**28**

Principal occupation / Job title (See Instructions)  
**NA**

Employer (See Instructions)  
**NA**

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**CYNTHIA RENTERIA**

Contributor address; City; State; Zip Code  
**354 FRANCIS, El Paso TX 79905**

Amount of contribution (\$)  
  
**20**

Principal occupation / Job title (See Instructions)  
**INSTRUCTOR**

Employer (See Instructions)  
**CENTER FOR EMPLOYMENT TRAINERS**

Date  
  
09/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**DANIEL ARELLANO**

Contributor address; City; State; Zip Code  
**1802 BAY CITY PL, El Paso TX 79936**

Amount of contribution (\$)  
  
**140**

Principal occupation / Job title (See Instructions)  
**RETIRED ASARCO**

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/23/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DANIEL ARIZPE

**6** Contributor address; City; State; Zip Code

8308 SOLAR PLACE, EI Paso TX 79904

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

LIFEGUARD

**9** Employer (See Instructions)

YMCA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DANIEL ARIZPE

Contributor address; City; State; Zip Code

8308 SOLAR PLACE, EI Paso TX 79904

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

LIFEGUARD

Employer (See Instructions)

YMCA

Date

08/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DANIEL CAREY-WHALEN

Contributor address; City; State; Zip Code

4312 PARK HILL, EI Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

MUSEUM DIRECTOR

Employer (See Instructions)

UTEP

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DANIEL CAREY-WHALEN

Contributor address; City; State; Zip Code

4312 PARKHILL, EL PASO TX 79902

Amount of contribution (\$)

35

Principal occupation / Job title (See Instructions)

MUSEUM DIRECTOR

Employer (See Instructions)

UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/18/2020

**5** Full name of contributor

DANIEL COLLINS

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

622 WEST END AVE, New York, NY 10024

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

EI PASO COUNTY

Date

08/17/2020

Full name of contributor

DANIEL PALACIOS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

5025 MEADOWLARK, EI PASO TX 79922

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

07/10/2020

Full name of contributor

DANIEL TATE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

309 WINDROSE PLACE, EL PASO TX 79912

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

HOME INSPECTOR

Employer (See Instructions)

SELF

Date

09/21/2020

Full name of contributor

DARLENE AGUIRRE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

14354 PATRIOT POINT, EI PASO TX 79938

Amount of contribution (\$)

30

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

CISD

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/21/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DARLENE AGUIRRE

**6** Contributor address; City; State; Zip Code

14354 PATRIOT POINT, EI Paso TX 79938

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

TEACHER

**9** Employer (See Instructions)

CISD

Date

07/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DAVID BAAKE

Contributor address; City; State; Zip Code

900 MYRTLE, EI Paso TX 79901

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

BAAKE LAW LLC

Date

08/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DAVID MENDOZA

Contributor address; City; State; Zip Code

7610 ALPINE DR, EI Paso TX 79915

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

DAVID MENDOZA

Contributor address; City; State; Zip Code

7610 ALPINE, EI Paso TX 79915

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

STATE OF TEXAS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date  
  
09/04/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**DAVID MENDOZA**  
.....  
6 Contributor address; City; State; Zip Code  
**7610 ALPINE, EI Paso TX 79915**

7 Amount of contribution (\$)  
  
**10**

8 Principal occupation / Job title (See Instructions)  
**NA**

9 Employer (See Instructions)  
**NA**

Date  
  
08/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**DAVID STOUT**  
.....  
Contributor address; City; State; Zip Code  
**2808 GRANT, EI Paso TX 79930**

Amount of contribution (\$)  
  
**50**

Principal occupation / Job title (See Instructions)  
**COUNTY COMMISSIONER**

Employer (See Instructions)  
**EI Paso COUNTY**

Date  
  
09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**DENISE PALACIOS**  
.....  
Contributor address; City; State; Zip Code  
**PO Box 1084, HARLINGEN TX 78551**

Amount of contribution (\$)  
  
**25**

Principal occupation / Job title (See Instructions)  
**ORGANIZER**

Employer (See Instructions)  
**TEXAS FREEDOM NETWORK**

Date  
  
07/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**DESIREE MILLER**  
.....  
Contributor address; City; State; Zip Code  
**14241 SMOKEY POINT, EI Paso TX 79938**

Amount of contribution (\$)  
  
**5**

Principal occupation / Job title (See Instructions)  
**NA**

Employer (See Instructions)  
**NA**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/18/2020

**5** Full name of contributor

DESIREE MILLER

**6** Contributor address;

14241 SMOKEY POINT, El Paso TX 79938

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

**5**

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/18/2020

Full name of contributor

DESIREE MILLER

Contributor address;

14241 SMOKEY POINT, El Paso TX 79938

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**5**

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/24/2020

Full name of contributor

DIANA GONZALEZ

Contributor address;

1467 FRANCESCA, El Paso TX 79936

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

CLAIMS

Employer (See Instructions)

SSA

Date

09/04/2020

Full name of contributor

DIEGO CARLOS

Contributor address;

510 RANDOLPH, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

EPISD

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

09/02/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**DOLORES BRIONES**

6 Contributor address; City; State; Zip Code

**6261 COSECHA LUNA, EL PASO TX 79932**

7 Amount of contribution (\$)

**75**

8 Principal occupation / Job title (See Instructions)

**RETIRED**

9 Employer (See Instructions)

**NA**

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**DOMINIQUE ISABELA**

Contributor address; City; State; Zip Code

**EI Paso TX 79903**

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

**STUDENT**

Employer (See Instructions)

**TX RISING**

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**DONNA BROM**

Contributor address; City; State; Zip Code

**11457 BUNKY HENRY LN, EI Paso TX 79936**

Amount of contribution (\$)

**100**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**NA**

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**Daisy Aguirre**

Contributor address; City; State; Zip Code

**2908 Federal, EI Paso TX 79930**

Amount of contribution (\$)

**20**

Principal occupation / Job title (See Instructions)

**Realtor**

Employer (See Instructions)

**HOMEGIRL**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/16/2020

**5** Full name of contributor

ED LICON

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

5972 TURTLE RIVER AVE, Las Vegas NV 89156

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/09/2020

Full name of contributor

ED SOTO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

515 S KANSAS, El Paso TX 79901

Amount of contribution (\$)

3000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

SOTO ENTERPRISES

Date

09/07/2020

Full name of contributor

EDEN KLEIN

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2125 CHRIS ROARK, El Paso TX 79936

Amount of contribution (\$)

13

Principal occupation / Job title (See Instructions)

LAW CLERK

Employer (See Instructions)

TRLA

Date

09/04/2020

Full name of contributor

EDUARDO ARELLANO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

7344 DESIERTO AZUL, EL PASO TX 79912

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor

ELISA NAVARRO

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

1571 A GREG POWERS DR, El Paso TX 79936

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date

08/26/2020

Full name of contributor

ELISA RUBIO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2527 SAVANNAH, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

OFFICE MANAGER

Employer (See Instructions)

ANASTASIA MARTINEZ, LPC

Date

09/12/2020

Full name of contributor

ELIZABETH ALLEN-RODRIGUEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

4020 Las Vegas, El Paso TX 79902

Amount of contribution (\$)

35

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

09/21/2020

Full name of contributor

ELIZABETH PREZA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

5737 GREEN CASTLE RD, El Paso 79932

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

EPCC

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

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10/5/2020 2:26:28 PM



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/23/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ELIZABETH VASQUEZ

**6** Contributor address; City; State; Zip Code

12513 TIERRA NOTRE RD, EI Paso TX 79938

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

PHARMACY TECH

**9** Employer (See Instructions)

CPS

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ERNESTO CHACON

Contributor address; City; State; Zip Code

5525 PLAINVIEW, EL PASO TX 79924

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

SUN METRO/LIFT DRIVER

Employer (See Instructions)

MV TRANSPORTATION

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVA GUERRERO

Contributor address; City; State; Zip Code

4227 SANTA RITA, EI Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVA GUERRERO

Contributor address; City; State; Zip Code

4227 SANTA RITA, EI Paso TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/13/2020

5 Full name of contributor

EVAN CARCERANO

6 Contributor address;

7740 NARDO GOODMAN, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

7 Amount of contribution (\$)

60

8 Principal occupation / Job title (See Instructions)

STUDENT

9 Employer (See Instructions)

NA

Date

09/03/2020

Full name of contributor

EVAN CARCERANO

Contributor address;

7740 NARDO GOODMAN, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

SALES ASSOCIATE

Employer (See Instructions)

FOSSIL

Date

09/24/2020

Full name of contributor

EVAN CARCERANO

Contributor address;

7740 NARDO GOODMAN, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

SALES ASSOCIATE

Employer (See Instructions)

FOSSIL

Date

08/15/2020

Full name of contributor

EVAN CARCERANO

Contributor address;

7740 NARDO GOODMAN, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

40

Principal occupation / Job title (See Instructions)

LEGISLATIVE PLANNING

Employer (See Instructions)

UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/31/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVAN CARCERANO

**6** Contributor address; City; State; Zip Code

7740 NARDO GOODMAN, El Paso TX 79912

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

COORDINATOR

**9** Employer (See Instructions)

UTEP

Date

07/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVANGELINA BALDERRAMA

Contributor address; City; State; Zip Code

725 HEMPSTEAD DR, El Paso TX 79912

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

INSURANCE CLAIMS

Employer (See Instructions)

CATALYTIC CLAIMS

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVANGELINA BALDERRAMA

Contributor address; City; State; Zip Code

725 HEMPSTEAD, El Paso TX 79912

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

CLAIMS

Employer (See Instructions)

NATIONAL LLOYDS

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVANGELINA BALDERRAMA

Contributor address; City; State; Zip Code

725 HEMPSTEAD, El Paso TX 79912

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

CLAIMS

Employer (See Instructions)

NATIONAL LLOYDS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/23/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVANGELINA BALDERRAMA

**6** Contributor address; City; State; Zip Code

725 HEMPSTEAD, El Paso TX 79912

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

CLAIMS

**9** Employer (See Instructions)

NATIONAL LLOYDS

Date

09/11/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

EVERETT SAUCEDO

Contributor address; City; State; Zip Code

2904 GRANT AVE, El Paso TX 79930

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/14/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

FANCY ADAMS

Contributor address; City; State; Zip Code

11877 IMPERIAL GEM AVE, El Paso TX 79936

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

OPERATIONS SPECIALIST

Employer (See Instructions)

PRINCETON REVIEW

Date

09/10/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

FERMIN ACOSTA

Contributor address; City; State; Zip Code

1334 LOMA VERDE, El Paso TX 79936

Amount of contribution (\$)

500

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/04/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

FERNANDO YAMAMOTO

6 Contributor address; City; State; Zip Code

643 UPSON, El Paso TX 79902

7 Amount of contribution (\$)

10

8 Principal occupation / Job title (See Instructions)

INSTRUCTOR

9 Employer (See Instructions)

UTEP

Date

08/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

FRANCISCO PEREZ

Contributor address; City; State; Zip Code

11605 VILLA Del Mar, El Paso TX 79927

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

DATA ENTRY

Employer (See Instructions)

NEWSBANK

Date

09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

FRED VILLALVA

Contributor address; City; State; Zip Code

1020 OLSON, El Paso TX 79903

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

CSR

Employer (See Instructions)

C31.COM

Date

08/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GABRIEL CAMACHO

Contributor address; City; State; Zip Code

1815 RAYNOLDS, EL PASO TX 79903

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

INSTRUCTOR

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/17/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GEOFFREY WRIGHT

**6** Contributor address; City; State; Zip Code

1303 N COTTON, EI Paso TX 79902

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

ARCHITECT

**9** Employer (See Instructions)

WDA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GEORGE ANDRITSOS

Contributor address; City; State; Zip Code

3116 MONTANA, EI Paso TX 79903

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

08/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GEORGE STOLTZ

Contributor address; City; State; Zip Code

9621 KATHY AVE, EI Paso TX 79927

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

STUDENT

Employer (See Instructions)

NA

Date

07/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GERTRUDE KONINGS

Contributor address; City; State; Zip Code

417 VALPLANO, EL PASO TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/03/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GIOVANNI CISNEROS

**6** Contributor address; City; State; Zip Code

642 EL PARQUE, El Paso TX 79912

**7** Amount of contribution (\$)

15

**8** Principal occupation / Job title (See Instructions)

RESEARCH ASSISTANT

**9** Employer (See Instructions)

NMSU

Date

09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GLORIA AMBLER

Contributor address; City; State; Zip Code

1125 BALTIMORE, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

EDUCATOR

Employer (See Instructions)

EPISD

Date

08/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GRACIELA BLANDON

Contributor address; City; State; Zip Code

1337 DESERT CANYON, El Paso TX 79912

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GRACIELA BURGESS

Contributor address; City; State; Zip Code

4420 OXFORD, El Paso TX 79903

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/17/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GRACIELA BURGESS

**6** Contributor address; City; State; Zip Code

4420 OXFORD, El Paso TX 79903

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GRACIELA MARTINEZ

Contributor address; City; State; Zip Code

2400 FLETCHER, El Paso TX 79936

Amount of contribution (\$)

125

Principal occupation / Job title (See Instructions)

COORDINATOR

Employer (See Instructions)

TRLA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GREG OATES

Contributor address; City; State; Zip Code

6305 BRISA Del Mar, El Paso TX 79912

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

SISD

Date

09/08/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

GUILLERMO CASTANEDA

Contributor address; City; State; Zip Code

1200 NIGHT HAWK, El Paso TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/15/2020

**5** Full name of contributor

HAL MARCUS

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

1308 N OREGON, El Paso, TX 79902

**7** Amount of contribution (\$)

500

**8** Principal occupation / Job title (See Instructions)

ARTIST

**9** Employer (See Instructions)

SELF

Date

09/18/2020

Full name of contributor

HANNAH BETTS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2601 ALABAMA, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/16/2020

Full name of contributor

HANNAH CURTIS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

529 W 44TH ST, INDIANAPOLIS, IN 46208

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

PRIVATE PRESCHOOL

Date

08/15/2020

Full name of contributor

HENRY DRAKE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2216 N KANSAS, El Paso TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
HILDA FIAN  
.....  
**6** Contributor address; City; State; Zip Code  
6560 GRAND ALPS, EI Paso TX 79912

**7** Amount of contribution (\$)  
  
140

**8** Principal occupation / Job title (See Instructions)  
SALES

**9** Employer (See Instructions)  
WEATHER KING

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
HOWARD & EVA SHAW  
.....  
Contributor address; City; State; Zip Code  
4227 SANTA RITA, EI Paso TX 79902

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)  
ENGINEER

Employer (See Instructions)  
CACI

Date  
  
09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ILIANA MARTINEZ  
.....  
Contributor address; City; State; Zip Code  
13013 AMHERST, EI Paso TX 79928

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)  
NOTARY PUBLIC

Employer (See Instructions)  
A&P TAX SERVICES

Date  
  
09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
INDIRA GORIS  
.....  
Contributor address; City; State; Zip Code  
540 83RD ST, BROOKLYN NY 11209

Amount of contribution (\$)  
  
100

Principal occupation / Job title (See Instructions)  
ADMINISTRATOR

Employer (See Instructions)  
SIMONS FOUNDATION

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/17/2020

5 Full name of contributor

INDIRA GORIS

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

540 83RD ST, BROOKLYN NY 11209

7 Amount of contribution (\$)

15

8 Principal occupation / Job title (See Instructions)

ADMINISTRATOR

9 Employer (See Instructions)

SIMONS FOUNDATION

Date

09/04/2020

Full name of contributor

INGO THOMAS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11009 LOMA GRANDE, EI Paso TX 79934

Amount of contribution (\$)

60

Principal occupation / Job title (See Instructions)

WEB DEVELOPER

Employer (See Instructions)

CITY OF EI Paso

Date

09/18/2020

Full name of contributor

INGO THOMAS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11009 LOMA GRANDE, EI Paso TX 79934

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

WEB DEVELOPER

Employer (See Instructions)

CITY OF EI Paso

Date

09/05/2020

Full name of contributor

IRMA CAMACHO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

9009 W H BURGESS, EI Paso TX 79925

Amount of contribution (\$)

60

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/28/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

IRMA MONTELONGO

**6** Contributor address; City; State; Zip Code

3520 BROADDUS, EL PASO TX 79904

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

PROFESSOR

**9** Employer (See Instructions)

UTEP

Date

07/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ISABEL BRIONES

Contributor address; City; State; Zip Code

1401 ADOLPH CARSON, El Paso TX 79936

Amount of contribution (\$)

40

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

07/14/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ISABEL BRIONES

Contributor address; City; State; Zip Code

1401 ADOLPH CARSON, El Paso TX 79936

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

ISAIHA DAWKINS

Contributor address; City; State; Zip Code

1330 TWILIGHT LN, El Paso TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

STUDENT

Employer (See Instructions)

NA

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City Clerk Dept.  
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# MONETARY POLITICAL CONTRIBUTIONS

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor

ISELA VASQUEZ

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

3216 SUNSET POINT DR, El Paso TX 79938

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

PARALEGAL

**9** Employer (See Instructions)

TRLA

Date

09/04/2020

Full name of contributor

ISELDA ACOSTA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2317 N CAMPBELL, El Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/16/2020

Full name of contributor

ISELDA ACOSTA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2317 N CAMPBELL, El Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/02/2020

Full name of contributor

ISELDA ACOSTA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2317 N CAMPBELL, El Paso TX 79902

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**08/24/2020**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**ISELDA ACOSTA**

6 Contributor address; City; State; Zip Code

**2317 N CAMPBELL, El Paso TX 79902**

7 Amount of contribution (\$)

**10**

8 Principal occupation / Job title (See Instructions)

**NA**

9 Employer (See Instructions)

**NA**

Date

**08/15/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**IVAN MIRO**

Contributor address; City; State; Zip Code

**3620 TIERRA ALBA, EL PASO TX 79938**

Amount of contribution (\$)

**30**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**COUNTY OF El Paso**

Date

**08/15/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**IVONNE DIAZ**

Contributor address; City; State; Zip Code

**3801 VANDERVEER, EL PASO TX 79938**

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

**ORGANIZER**

Employer (See Instructions)

**FOR TEXAS**

Date

**09/21/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**JAIME GONZALEZ**

Contributor address; City; State; Zip Code

**1145 RIM ROAD, El Paso TX 79902**

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

**ENGINEER**

Employer (See Instructions)

**FUNK & CO**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

City Clerk Dept.  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/06/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JAMES SAUNDERS & JULIE BALOVICH

**6** Contributor address; City; State; Zip Code

305 TEXAS OAK, ALPINE TX 79830

**7** Amount of contribution (\$)

250

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date

07/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JASMIN FLORES

Contributor address; City; State; Zip Code

10971 YOGI BERRA DR, EI Paso TX 79934

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

CURRICULUM ASSISTANT

Employer (See Instructions)

EPCC

Date

09/23/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JASMIN FLORES

Contributor address; City; State; Zip Code

10971 YOGI BERRA, EI Paso TX 79934

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

CURRICULUM ASSISTANT

Employer (See Instructions)

EPCC

Date

09/02/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JASMIN FLORES

Contributor address; City; State; Zip Code

10971 YOGI BERRA, EI Paso TX 79934

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

CURRICULUM ASSISTANT

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
09/06/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JASMINE ESTRADA

**6** Contributor address; City; State; Zip Code

12285 GOLDEN SUN, El Paso TX 79938

**7** Amount of contribution (\$)  
  
20

**8** Principal occupation / Job title (See Instructions)

TEACHER

**9** Employer (See Instructions)

YISD

Date  
  
07/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JEAN-CARLO TIRADO

Contributor address; City; State; Zip Code

12285 ROBERTA LYNNE, El Paso TX 79936

Amount of contribution (\$)  
  
15

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date  
  
09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JEFFREY VARGAS

Contributor address; City; State; Zip Code

3400 HIGHLAND, CALDWELL NJ 7006

Amount of contribution (\$)  
  
25

Principal occupation / Job title (See Instructions)

SENIOR DIRECTOR TECH

Employer (See Instructions)

NBC UNIVERSAL

Date  
  
07/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JENA CAMP

Contributor address; City; State; Zip Code

3012 WHEELING AVE, El Paso TX 79930

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)

EDUCATOR, CULTURAL WORKER

Employer (See Instructions)

TALLER COLIBRI

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JENA CAMP

**6** Contributor address; City; State; Zip Code

3012 WHEELING, El Paso TX 79930

**7** Amount of contribution (\$)  
  
20

**8** Principal occupation / Job title (See Instructions)

EDUCATOR, CULTURAL WORKER

**9** Employer (See Instructions)

TALLER COLIBRI

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JERRY MALDONADO

Contributor address; City; State; Zip Code

182 MONTGOMERY, NEWBURGH NY 12550

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

DIRECTOR

Employer (See Instructions)

FORD FOUNDATION

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESS TOLBERT

Contributor address; City; State; Zip Code

1211 STOCKWELL, EL PASO TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ASSISTANT PROFESSOR

Employer (See Instructions)

UTEP

Date

07/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESSICA CASTRO

Contributor address; City; State; Zip Code

2712 JEFFERSON, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

El Paso COUNTY

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESSICA CENICEROS

**6** Contributor address; City; State; Zip Code

3127 FEDERAL, El Paso TX 79930

**7** Amount of contribution (\$)

**8**

**8** Principal occupation / Job title (See Instructions)

BARRISTA

**9** Employer (See Instructions)

TIPPI TEN

Date

09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESSICA JIMENEZ

Contributor address; City; State; Zip Code

1762 GREEN GATE WAY, El Paso TX 79936

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

DISTRICT MANAGER

Employer (See Instructions)

PAPAYA

Date

09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESSICA JIMENEZ

Contributor address; City; State; Zip Code

1762 GREEN GATE WAY, El Paso TX 79936

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

DISTRICT MANAGER

Employer (See Instructions)

PAPAYA

Date

09/24/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESUS GUERECA

Contributor address; City; State; Zip Code

412 CINCINNATI, El Paso TX 79902

Amount of contribution (\$)

**100**

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

DMRS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

07/18/2020

5 Full name of contributor

JESUS PLACENCIO

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

525 4TH ST, ANTHONY TX 79821

7 Amount of contribution (\$)

25

8 Principal occupation / Job title (See Instructions)

WATER ENGINEER

9 Employer (See Instructions)

ARCADIS

Date

08/15/2020

Full name of contributor

JESUS PLACENCIO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

525 4TH ST, ANTHONY TX 79821

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

WATER ENGINEER

Employer (See Instructions)

ARCADIS

Date

08/21/2020

Full name of contributor

JESUS SEPEDA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

12240 ROBERT DAHL, El Paso TX 79938

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

07/07/2020

Full name of contributor

JESUS VALDEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

4800 CASETA RD, El Paso TX 79922

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/07/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESUS VALDEZ

**6** Contributor address; City; State; Zip Code

4800 CASETA RD, EI Paso TX 79922

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

09/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESUS VALDEZ

Contributor address; City; State; Zip Code

4800 CASETA, EI Paso TX 79922

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JESUS VALDEZ

Contributor address; City; State; Zip Code

4800 CASETA RD, EI Paso TX 79922

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOHN CONWELL

Contributor address; City; State; Zip Code

3096 JAVA CHIP PL, EI Paso TX 79938

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date  
  
08/15/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOHN PEARSON

6 Contributor address; City; State; Zip Code

700 PROSPECT, EL PASO TX 79902

7 Amount of contribution (\$)

44

8 Principal occupation / Job title (See Instructions)

TEACHER

9 Employer (See Instructions)

UTEP

Date

09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOHN RUFFIER

Contributor address; City; State; Zip Code

12440 KNIGHTSBRIDGE, El Paso TX 79928

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

OFFICE ASSISTANT

Employer (See Instructions)

PREMIER MEDICAL SUPPLY

Date

08/24/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOHN RUFFIER

Contributor address; City; State; Zip Code

12440 KNIGHTSBRIDGE, El Paso TX 79928

Amount of contribution (\$)

3

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JONATHAN AYALA

Contributor address; City; State; Zip Code

2630 ADAMS MILL RD NW, Washington DC 20009

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

PROJECT COORDINATOR

Employer (See Instructions)

George Washington UNIVERSITY

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# MONETARY POLITICAL CONTRIBUTIONS

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
JOSE MONTOYA  
.....  
**6** Contributor address; City; State; Zip Code  
2500 ALTURA, El Paso TX 79930

**7** Amount of contribution (\$)  
  
100

**8** Principal occupation / Job title (See Instructions)  
ARTIST

**9** Employer (See Instructions)  
SELF

Date  
  
08/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
JOSE MONTOYA  
.....  
Contributor address; City; State; Zip Code  
2500 ALTURA, El Paso TX 79930

Amount of contribution (\$)  
  
25

Principal occupation / Job title (See Instructions)  
ARTIST

Employer (See Instructions)  
SELF

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
JOSE RODRIGUEZ  
.....  
Contributor address; City; State; Zip Code  
1809 GEORGIA, El Paso TX 79902

Amount of contribution (\$)  
  
500

Principal occupation / Job title (See Instructions)  
STATE SENATOR/ATTORNEY

Employer (See Instructions)  
STATE OF TEXAS

Date  
  
09/09/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
JOSEPH SOTO  
.....  
Contributor address; City; State; Zip Code  
515 S. KANSAS, El Paso TX 79901

Amount of contribution (\$)  
  
2000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
SOTO ENTERPRISES

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOSHUA E. LERMA

**6** Contributor address; City; State; Zip Code

6258 VIA LUNGO AVE, EI Paso TX 79932

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

08/23/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JOSHUA NISENSON

Contributor address; City; State; Zip Code

10866 WASHINGTON BLVD, Culver City CA 90232

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

DEPUTY ORGANIZER

Employer (See Instructions)

FRIENDS OF BEN MCADAMS

Date

08/19/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JUAN SILVA

Contributor address; City; State; Zip Code

165 VILLA ROJAS DR, HORIZON CITY TX 79928

Amount of contribution (\$)

27

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

JUD BURGESS

Contributor address; City; State; Zip Code

4428 HASTINGS, EI Paso TX 79903

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

BOOKSTORE

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**09/15/2020**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**JUDITH ACKERMAN**

6 Contributor address; City; State; Zip Code

**3344 EILEEN DR, EI Paso TX 79904**

7 Amount of contribution (\$)

**20**

8 Principal occupation / Job title (See Instructions)

**RETIRED**

9 Employer (See Instructions)

**NA**

Date

**07/26/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**JULIE LUCAS**

Contributor address; City; State; Zip Code

**3231 NATIONS, EI Paso TX 79930**

Amount of contribution (\$)

**20**

Principal occupation / Job title (See Instructions)

**FOOD PANTRY MANAGER**

Employer (See Instructions)

**BORDERLAND RAINBOW CENTER**

Date

**09/17/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**KAITY ROSS**

Contributor address; City; State; Zip Code

**1640 CLARENCE, LAKEWOOD OH 44107**

Amount of contribution (\$)

**40**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**NA**

Date

**09/24/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**KARA SHEEHAN**

Contributor address; City; State; Zip Code

**811 SKILLMAN, DALLAS TX 75214**

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

**TX COORDINATOR**

Employer (See Instructions)

**CENTER FOR POPULAR DEMOCRACY**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**08/25/2020**

5 Full name of contributor

**KAREN BECKNER**

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

**17576 S SKYRIDGE, MT VERNON, WA 98274**

7 Amount of contribution (\$)

**100**

8 Principal occupation / Job title (See Instructions)

**REAL ESTATE**

9 Employer (See Instructions)

**WINDERMERE**

Date

**09/01/2020**

Full name of contributor

**KATHERINE LOPEZ**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**1918 N STANTON, El Paso TX 79902**

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

**OFFICE MANAGER**

Employer (See Instructions)

**MANUEL LOPEZ, MD**

Date

**09/10/2020**

Full name of contributor

**KATHERINE MORTIMER**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**7220 ROCHESTER, El Paso TX 79912**

Amount of contribution (\$)

**30**

Principal occupation / Job title (See Instructions)

**PROFESSOR**

Employer (See Instructions)

**UTEP**

Date

**09/04/2020**

Full name of contributor

**KATHLEEN STAUDT**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**7289 CACTUS SPINE, El Paso TX 79912**

Amount of contribution (\$)

**100**

Principal occupation / Job title (See Instructions)

**RETIRED**

Employer (See Instructions)

**NA**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

08/15/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KATHRYN CRADDOCK

6 Contributor address; City; State; Zip Code

404 N 7TH, MCALLEN TX 78501

7 Amount of contribution (\$)

50

8 Principal occupation / Job title (See Instructions)

ATTORNEY

9 Employer (See Instructions)

TRLA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KENNETH BELL

Contributor address; City; State; Zip Code

1115 CATALINA, EI Paso TX 79925

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

STUDENT/SECURITY

Employer (See Instructions)

DESTINATION EI Paso

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KENNETH BELL

Contributor address; City; State; Zip Code

1115 CATALINA WAY, APT G, EI Paso TX

Amount of contribution (\$)

55

Principal occupation / Job title (See Instructions)

FIELD ORGANIZER

Employer (See Instructions)

FAIR SHOT TEXAS

Date

07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

KENNETH BELL

Contributor address; City; State; Zip Code

1115 CATALINA WAY, EI Paso TX 79924

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

FIELD ORGANIZER

Employer (See Instructions)

FAIR SHOT TEXAS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

09/05/2020

5 Full name of contributor

**KENNETH RAMIREZ**

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

**664 SOUTH EASTMAN, Los Angeles CA 90023**

7 Amount of contribution (\$)

**25**

8 Principal occupation / Job title (See Instructions)

**NON-PROFIT**

9 Employer (See Instructions)

**CALPAL**

Date

07/26/2020

Full name of contributor

**KEVIN MCCARY**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**4749A SIR GARETH, El Paso TX 79902**

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

**ATTORNEY**

Employer (See Instructions)

**El Paso COUNTY**

Date

09/13/2020

Full name of contributor

**KIERRA ROBINSON**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**2313 CAMPFIRE, El Paso TX 79937**

Amount of contribution (\$)

**25**

Principal occupation / Job title (See Instructions)

**ADMINISTRATIVE ASSISTANT**

Employer (See Instructions)

**IDEA MESA HILLS**

Date

09/13/2020

Full name of contributor

**KITTY O'DONNELL**

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

**4045 EMORY, El Paso TX 79922**

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

**LCSW**

Employer (See Instructions)

**COUNSELING LAS CRUCES**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**09/05/2020**

5 Full name of contributor

**KITTY SPALDING**

6 Contributor address;

**920 BLANCHARD AVE, El Paso TX 79902**

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

7 Amount of contribution (\$)

**1000**

8 Principal occupation / Job title (See Instructions)

**RETIRED**

9 Employer (See Instructions)

**NA**

Date

**09/01/2020**

Full name of contributor

**KITTY SPALDING**

Contributor address;

**920 BLANCHARD AVE, El Paso TX 79902**

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**30**

Principal occupation / Job title (See Instructions)

**RETIRED**

Employer (See Instructions)

**NA**

Date

**08/15/2020**

Full name of contributor

**KRISTI LAI**

Contributor address;

**4717 ROSINANTE RD, EL PASO TX 79922**

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**20**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**NA**

Date

**08/15/2020**

Full name of contributor

**KRISTY SEANEZ**

Contributor address;

**412 CINCINNATI, El Paso TX 79902**

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

**40**

Principal occupation / Job title (See Instructions)

**REGISTERED NURSE**

Employer (See Instructions)

**STATE OF TEXAS**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/04/2020

5 Full name of contributor

LARRY GAINOR

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

140 WEST CASTELLANO, EL PASO TX 79912

7 Amount of contribution (\$)

250

8 Principal occupation / Job title (See Instructions)

LIBRARIAN

9 Employer (See Instructions)

SAN JACINTO COLLEGE

Date

09/23/2020

Full name of contributor

LARRY GAINOR

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

140 W CASTELLANO, EL PASO TX 79912

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

LIBRARIAN

Employer (See Instructions)

SAN JACINTO COLLEGE

Date

09/24/2020

Full name of contributor

LARRY GAINOR

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

140 W CASTELLANO, EL PASO TX 79912

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

LIBRARIAN

Employer (See Instructions)

SAN JACINTO COLLEGE

Date

09/14/2020

Full name of contributor

LAURA CAUDILLO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

589 CABRINI CIR, El Paso TX 79938

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

REGISTERED NURSE

Employer (See Instructions)

CARE QUALITY

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
07/21/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LAURA MARQUEZ  
**6** Contributor address; City; State; Zip Code  
2509 PENWOOD DR, EL PASO TX 79935

**7** Amount of contribution (\$)  
30

**8** Principal occupation / Job title (See Instructions)  
POLICY FELLOW

**9** Employer (See Instructions)  
PASO DEL NORTE CHILDRENS DEVELOPMEN

Date  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LAURA MARQUEZ  
Contributor address; City; State; Zip Code  
2509 PENWOOD, EL PASO TX 79935

Amount of contribution (\$)  
10

Principal occupation / Job title (See Instructions)  
POLICY FELLOW

Employer (See Instructions)  
PASO DEL NORTE CHILDREN'S DEVELOPMEN

Date  
09/14/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LAURA ROSENCRANS  
Contributor address; City; State; Zip Code  
8937 OLD COUNTY RD, EI Paso TX 79907

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
MANAGER

Employer (See Instructions)  
LA TAPATIA

Date  
07/20/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LAURA SANDOVAL  
Contributor address; City; State; Zip Code  
11948 OAK CROSSING DR, EI Paso TX 79936

Amount of contribution (\$)  
10

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**07/31/2020**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**LAURIE MULLER**

6 Contributor address; City; State; Zip Code

**130 RIO MONTE, El Paso TX 79915**

7 Amount of contribution (\$)

**10**

8 Principal occupation / Job title (See Instructions)

**NA**

9 Employer (See Instructions)

**NA**

Date

**08/15/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**LAWRENCE GAINOR**

Contributor address; City; State; Zip Code

**140 W. CASTELLANO, #306, EL PASO TX 79912**

Amount of contribution (\$)

**144**

Principal occupation / Job title (See Instructions)

**RETIRED**

Employer (See Instructions)

**NA**

Date

**08/21/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**LEONOR SANTOS**

Contributor address; City; State; Zip Code

**725 VILLA VANESSA, El Paso TX 79912**

Amount of contribution (\$)

**50**

Principal occupation / Job title (See Instructions)

**COURT INTERPRETER**

Employer (See Instructions)

**FREELANCE**

Date

**09/13/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**LEONOR SOSA**

Contributor address; City; State; Zip Code

**14844 WILLY WORSLEY, EL PASO TX 79938**

Amount of contribution (\$)

**20**

Principal occupation / Job title (See Instructions)

**TRAINER**

Employer (See Instructions)

**EP ELECTRIC**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LINDA ZAVALA

**6** Contributor address; City; State; Zip Code

401 FRANCIS ST, EI Paso TX 79905

**7** Amount of contribution (\$)  
  
50

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date  
  
09/10/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LISA SOTO

Contributor address; City; State; Zip Code

PO Box 12307, EI Paso TX 79913

Amount of contribution (\$)  
  
250

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

UTEP

Date  
  
09/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LORI CURRY

Contributor address; City; State; Zip Code

1112 MADELEINE, EI Paso TX 79902

Amount of contribution (\$)  
  
10

Principal occupation / Job title (See Instructions)

LIBRARIAN

Employer (See Instructions)

EPISD

Date  
  
09/03/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LUCIE JAQUEZ

Contributor address; City; State; Zip Code

3697 BISHOP WAY, EI Paso TX 79903

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)

MESSAGE THERAPIST

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
08/25/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LUIS ENRIQUE CHEW  
**6** Contributor address; City; State; Zip Code  
11624 STOCKMEYER, EL PASO TX 79936

**7** Amount of contribution (\$)  
100

**8** Principal occupation / Job title (See Instructions)  
EXECUTIVE DIRECTOR

**9** Employer (See Instructions)  
VOLAR CENTER

Date  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LUIS HERNANDEZ  
Contributor address; City; State; Zip Code  
1384 MICHELANGELO, EI Paso TX 79936

Amount of contribution (\$)  
20

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LUIS MORENO  
Contributor address; City; State; Zip Code  
12240 HARTLEPOOL, HORIZON CITY, TX 79928

Amount of contribution (\$)  
25

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
07/20/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LUIS NEGRON  
Contributor address; City; State; Zip Code  
501 RANDOLPH, EI Paso TX 79902

Amount of contribution (\$)  
100

Principal occupation / Job title (See Instructions)  
DISTRICT DIRECTOR

Employer (See Instructions)  
STATE SENATOR JOSE RODRIGUEZ

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LUIS NEGRON

**6** Contributor address; City; State; Zip Code

501 RANDOLPH, El Paso TX 79902

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

DISTRICT DIRECTOR

**9** Employer (See Instructions)

STATE SENATOR JOSE RODRIGUEZ

Date

08/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LUIS PACHECO

Contributor address; City; State; Zip Code

10824 IVANHOE, El Paso TX 79935

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LUIS PACHECO

Contributor address; City; State; Zip Code

10824 IVANHOE, El Paso TX 79935

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

LUIS PACHECO

Contributor address; City; State; Zip Code

10824 IVANHOE, E PASO TX 79935

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/19/2020

**5** Full name of contributor

LUIS PACHECO

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

10824 IVANHOE, El Paso TX 79935

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/04/2020

Full name of contributor

LUIS PACHECO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10824 IVANHOE, El Paso TX 79935

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/19/2020

Full name of contributor

M COHN

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1000 KELLY WAY, El Paso TX 79902

Amount of contribution (\$)

75

Principal occupation / Job title (See Instructions)

CENSUS WORKER

Employer (See Instructions)

US CENSUS

Date

08/25/2020

Full name of contributor

MALU PICARD-AMI

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3532 LEBANON, El Paso TX 79930

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

FACULTY

Employer (See Instructions)

UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**114**

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/04/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARCO COVARRUBIAS

6 Contributor address; City; State; Zip Code

3209 SAVANNAH, EI Paso TX 79930

7 Amount of contribution (\$)

20

8 Principal occupation / Job title (See Instructions)

TUTOR

9 Employer (See Instructions)

EPISD

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARCOS MUNOZ

Contributor address; City; State; Zip Code

243 S GLENWOOD, EL PASO TX 79905

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

EPISD

Date

09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARCOS REY

Contributor address; City; State; Zip Code

3518 DOUGLAS, EI Paso TX 79903

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

HR

Employer (See Instructions)

UMC

Date

07/26/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARGARET BARNES

Contributor address; City; State; Zip Code

4222 N STANTON, EI Paso TX 79902

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

TRLA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/26/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARGARET BARNES

**6** Contributor address; City; State; Zip Code

4222 N STANTON, El Paso TX 79902

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

TRLA

Date

08/30/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARIA ESTELA PROVENCIO

Contributor address; City; State; Zip Code

1308 ELMHURST, El Paso TX 79925

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

RETIRED TEACHER

Employer (See Instructions)

NA

Date

08/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARIA LOPEZ

Contributor address; City; State; Zip Code

340 ESTANCIAS DEL VALLE, SAN ELIZARIO, TX 7984

Amount of contribution (\$)

11

Principal occupation / Job title (See Instructions)

SECURITY GUARD

Employer (See Instructions)

ART CO

Date

09/02/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARIAH LABRADO

Contributor address; City; State; Zip Code

7350 ALPHA, El Paso TX 79915

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

RETAIL SUPERVISOR

Employer (See Instructions)

PAPAYA CLOTHING

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
07/26/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
MARIAH LABRADO  
.....  
**6** Contributor address; City; State; Zip Code  
7350 ALPHA AVE, El Paso TX 79915

**7** Amount of contribution (\$)  
10

**8** Principal occupation / Job title (See Instructions)  
RETAIL SUPERVISOR

**9** Employer (See Instructions)  
PAPAYA CLOTHING

Date  
08/23/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
MARIAH MENDOZA  
.....  
Contributor address; City; State; Zip Code  
236 COLUMBIA AVE, El Paso TX 79907

Amount of contribution (\$)  
10

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
07/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
MARIE OTERO  
.....  
Contributor address; City; State; Zip Code  
1015 N FLORENCE, El Paso TX 79902

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
HAIR STYLIST

Employer (See Instructions)  
SELF

Date  
09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
MARILYN GUIDA  
.....  
Contributor address; City; State; Zip Code  
7465 STONEY HILL, El Paso TX 79904

Amount of contribution (\$)  
200

Principal occupation / Job title (See Instructions)  
RETIRED

Employer (See Instructions)  
NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/25/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARILYN GUIDA

**6** Contributor address; City; State; Zip Code

7465 STONEY HILL DRIVE APT 9 A, EI Paso TX 79904

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARILYN GUIDA

Contributor address; City; State; Zip Code

7465 STONEY HILL, EI Paso TX 79904

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

09/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARILYN GUIDA

Contributor address; City; State; Zip Code

7465 STONEY HILL, EI Paso TX 79904

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARILYN GUIDA

Contributor address; City; State; Zip Code

3714 MOONLIGHT, EI Paso TX 79904

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/25/2020

**5** Full name of contributor

MARILYN GUIDA

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

7465 STONEY HILL DRIVE APT 9 A, El Paso TX 79904

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

09/13/2020

Full name of contributor

MARISSA CHAVEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

7359 27TH AVE SW, SEATTLE WA 98126

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

POLICY ANALYST

Employer (See Instructions)

STATE LEGISLATURE

Date

09/10/2020

Full name of contributor

MARIVEL OROPEZA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1850 GREENFIELD, Los Angeles CA 90025

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

EDUCATOR

Employer (See Instructions)

UCLA

Date

09/15/2020

Full name of contributor

MARK DELGADO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

6213 BRISA Del Mar, El Paso TX 79912

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

PHYSICAL THERAPIST

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/21/2020

**5** Full name of contributor

MARLON PICADO

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

7171 ROYAL PALM STREET, El Paso TX 79912

**7** Amount of contribution (\$)

30

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

08/27/2020

Full name of contributor

MARSHALL CARTER-TRIPP

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

79 KINGERY, EL PASO TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/04/2020

Full name of contributor

MARTIN BENCOMO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

2105 LOUISIANA, El Paso TX 79930

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

GRAPHIC DESIGNER

Employer (See Instructions)

UMC

Date

08/06/2020

Full name of contributor

MARY SILVA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

4744 LOMA DE PLATA, El Paso TX 79934

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

OPERATIONS MANAGER

Employer (See Instructions)

WHITMORE TRAVEL PARTNERS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/03/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MARY SPITZER

**6** Contributor address; City; State; Zip Code

5705 PEBBLE BEACH, El Paso TX 79912

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

COMPOST TECHNICIAN

**9** Employer (See Instructions)

COMPOST CATS

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MAYRA CHAVEZ

Contributor address; City; State; Zip Code

601 W YANDELL, EL PASO TX 79902

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

RESEARCH ASSISTANT

Employer (See Instructions)

UTEP

Date

09/18/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MAYRA CHAVEZ

Contributor address; City; State; Zip Code

601 YANDELL, EL PASO TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

RESEARCH ASSISTANT

Employer (See Instructions)

UTEP

Date

08/28/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MELEAH GEERTSMA

Contributor address; City; State; Zip Code

1928 GRANT, EVANSTON IL 60201

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

NATIONAL RESOURCES DEFENSE COUNCIL

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
**114**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

4 Date

**08/01/2020**

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**MELISSA MARTINEZ**

6 Contributor address; City; State; Zip Code

**9500 MONTROSE, EL PASO TX 79925**

7 Amount of contribution (\$)

**10**

8 Principal occupation / Job title (See Instructions)

**HEALTH ASSISTANT**

9 Employer (See Instructions)

**CONSUMER DIRECT CARE**

Date

**08/25/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**MELISSA TREJO**

Contributor address; City; State; Zip Code

**1188 MESQUITE ROCK, EI Paso TX 79934**

Amount of contribution (\$)

**20**

Principal occupation / Job title (See Instructions)

**PHLEBOTOMIST**

Employer (See Instructions)

**CLINICAL PATHOLOGY LABS**

Date

**09/24/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**MERRICK MENESES**

Contributor address; City; State; Zip Code

**3412 DORNOCH, EL PASO TX 79925**

Amount of contribution (\$)

**5**

Principal occupation / Job title (See Instructions)

**NA**

Employer (See Instructions)

**NA**

Date

**09/07/2020**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

**MICHAEL ALDEN**

Contributor address; City; State; Zip Code

**2232 DECAMP POINT, EI Paso TX 79938**

Amount of contribution (\$)

**10**

Principal occupation / Job title (See Instructions)

**INTERIOR DESIGNER**

Employer (See Instructions)

**NA**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHAEL ALVAREZ

**6** Contributor address; City; State; Zip Code

234 BUENA VISTA, El Paso TX 79905

**7** Amount of contribution (\$)

45

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHAEL LEWIS

Contributor address; City; State; Zip Code

2450 WICKERSHAM LN, AUSTIN TX 78741

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ACCOUNT EXECUTIVE

Employer (See Instructions)

DIALPAD

Date

07/20/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHAEL SPURLOCK

Contributor address; City; State; Zip Code

1118 KELLY WAY, El Paso TX 79902

Amount of contribution (\$)

35

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHELLE CARREON

Contributor address; City; State; Zip Code

1620 St. John's DRIVE, El Paso TX 79903

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

LAB MANAGER

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

07/26/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHELLE DELGADO

6 Contributor address; City; State; Zip Code

601 N OREGON, El Paso TX 79901

7 Amount of contribution (\$)

25

8 Principal occupation / Job title (See Instructions)

ARTIST

9 Employer (See Instructions)

SELF

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MICHELLE E. CARREON

Contributor address; City; State; Zip Code

1620 ST. JOHNS DR, El Paso TX 79903

Amount of contribution (\$)

8

Principal occupation / Job title (See Instructions)

WRITING CENTER MANAGER

Employer (See Instructions)

EPCC

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MIGUEL ESCOTO

Contributor address; City; State; Zip Code

704 WELLESLEY, El Paso TX 79902

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

COMMUNITY ORGANIZER

Employer (See Instructions)

EARTHWORKS

Date

08/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MIGUEL JUAREZ

Contributor address; City; State; Zip Code

1400 HONEYSUCKLE DR, El Paso TX 79925

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/21/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MIKA COHEN-JONES

**6** Contributor address; City; State; Zip Code

626 BLACKER, El Paso TX 79902

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

RESEARCHER

**9** Employer (See Instructions)

SELF

Date

09/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MIKAILA HERNANDEZ

Contributor address; City; State; Zip Code

3762 CONRAD AVE, San Diego CA 92117

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

LAW CLERK

Employer (See Instructions)

STOKES WAGNER

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MONICA LIRA

Contributor address; City; State; Zip Code

1417 LUZ DE CUEVA, El Paso TX 79912

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

EVENT COORDINATOR

Employer (See Instructions)

EI Paso EXCLUSIVE EVENTS

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

MONTSE GARRIGA

Contributor address; City; State; Zip Code

209 E WALNUT, EL SEGUNDO CA 90245

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

MARKETER

Employer (See Instructions)

APPLE

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/18/2020

**5** Full name of contributor

MORTON NAESS

**6** Contributor address;

147 PORFIRO DIAZ, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor

MYRA GARCIA

Contributor address;

3707 OXFORD AVE, El Paso TX

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

44

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

NMSU

Date

07/02/2020

Full name of contributor

MYRA GARCIA

Contributor address;

3707 OXFORD, El Paso TX 79903

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

30

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

NMSU

Date

09/15/2020

Full name of contributor

NAOMI FERTMAN

Contributor address;

1119 OCTAVIA, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

LECTURER

Employer (See Instructions)

UTEP

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
NAT HUSEBY  
**6** Contributor address; City; State; Zip Code  
7227 N MESA, APT. 1006, El Paso TX 79922

**7** Amount of contribution (\$)  
20

**8** Principal occupation / Job title (See Instructions)  
GROWER

**9** Employer (See Instructions)  
SIERRA VISTA GROWERS

Date  
08/02/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
NATALIE HUSEBY  
Contributor address; City; State; Zip Code  
4025 LITTLE LANE, El Paso TX 79922

Amount of contribution (\$)  
20

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
NICKY MALA  
Contributor address; City; State; Zip Code  
12108 VILLAGRANDE, EL PASO TX 79936

Amount of contribution (\$)  
20

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
09/11/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
NICOLAS RODRIGUEZ  
Contributor address; City; State; Zip Code  
911 DALLAS, El Paso TX 79902

Amount of contribution (\$)  
100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/24/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

NICOLAS SILVA

**6** Contributor address; City; State; Zip Code

3316 FREEPORT, El Paso TX 79935

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

NICOLE ANTEBI

Contributor address; City; State; Zip Code

2425 SILVERLAKE, Los Angeles CA 90039

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/01/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

NICOLE FERRINI

Contributor address; City; State; Zip Code

2919 FEDERAL, El Paso TX 79930

Amount of contribution (\$)

60

Principal occupation / Job title (See Instructions)

DIRECTOR

Employer (See Instructions)

CITY OF El Paso

Date

08/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

NORA GONZALEZ

Contributor address; City; State; Zip Code

620 N LEE TREVINO, El Paso TX 79907

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

LEGAL ASSISTANT

Employer (See Instructions)

Santa Fe DREAMERS PROJECT

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

09/17/2020

5 Full name of contributor

NORA GONZALEZ

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

620 N LEE TREVINO, El Paso TX 79907

7 Amount of contribution (\$)

50

8 Principal occupation / Job title (See Instructions)

LEGAL ASSISTANT

9 Employer (See Instructions)

Santa Fe DREAMERS

Date

08/15/2020

Full name of contributor

NUBIA LEGARDA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

351 MONROE, El Paso TX 79930

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

CERTIFIED NURSE ASSISTANT

Employer (See Instructions)

GUILLEN TX STATE VET HOSPITAL

Date

08/01/2020

Full name of contributor

NUBIA WILSON

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

7677 BARRINGTON CT, RANCHO CUCA, CA 91730

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

SOAR CHARTER ACADEMY

Date

09/13/2020

Full name of contributor

OCTAVIO DOMINGUEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3948 Las Vegas, El Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

El Paso COUNTY

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/10/2020

**5** Full name of contributor

OMAR AVILA

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

3209 NATIONS, EI Paso TX 79930

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

SUPERVISOR

**9** Employer (See Instructions)

Home Depot

Date

07/22/2020

Full name of contributor

OPHRA LEYSER-WHALEN

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

4312 PARKHILL DR, EL PASO TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

UTEP

Date

08/15/2020

Full name of contributor

PABLO C CHAVEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

6400 EDGEMERE, APT 45, EL PASO TX 79935

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

ARCHITECTURAL DESIGNER

Employer (See Instructions)

ROOT ARCHITECTS

Date

09/20/2020

Full name of contributor

PABLO GALINDO-PAYAN

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11771 STEPHANIE, EI Paso TX 79936

Amount of contribution (\$)

40

Principal occupation / Job title (See Instructions)

CONSULTANT

Employer (See Instructions)

BOSTON CONSULTANT GROUP

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# MONETARY POLITICAL CONTRIBUTIONS

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/23/2020

**5** Full name of contributor

PAM MARTINEZ

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

10253 RIDGEWOOD, EL PASO TX 79925

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

LOAN PROCESSOR

**9** Employer (See Instructions)

AMERICAN EAGLE MORTGAGE

Date

07/25/2020

Full name of contributor

PAMELA GRAJEDA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

11304 LAKE ONEIDA, El Paso TX 79936

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/21/2020

Full name of contributor

PATRICIA DELGADO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10509 TAREYTON, EL PASO TX 79924

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/15/2020

Full name of contributor

PAUL ROBERT ENRIQUEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

El Paso TX 79902

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

ASSOCIATE

Employer (See Instructions)

WALMART

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/16/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PAULINA ALMANZA

**6** Contributor address; City; State; Zip Code

1219 PROSPECT, EI Paso TX 79902

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

TRLA

Date

09/02/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PAULINA ALMANZA

Contributor address; City; State; Zip Code

1219 PROSPECT, EI Paso TX 79902

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

TRLA

Date

08/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PEDRO BLANDON

Contributor address; City; State; Zip Code

1337 DESERT CANYON DR, EI Paso TX 79912

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

PHYSICIAN

Employer (See Instructions)

HCA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PEDRO BLANDON

Contributor address; City; State; Zip Code

1337 DESERT CANYON, EI Paso TX 79912

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

PHYSICIAN

Employer (See Instructions)

HCA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor

PEDRO BLANDON

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

1337 DESERT CANYON DR, EI Paso TX 79912

**7** Amount of contribution (\$)

40

**8** Principal occupation / Job title (See Instructions)

PHYSICIAN

**9** Employer (See Instructions)

HCA

Date

09/15/2020

Full name of contributor

PEGGY HINKLE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

8517 HOPEWELL, EI Paso TX 79925

Amount of contribution (\$)

195

Principal occupation / Job title (See Instructions)

SELF-EMPLOYED

Employer (See Instructions)

SELF

Date

09/16/2020

Full name of contributor

PETE DUARTE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

9009 W H BURGESS, EI Paso TX 79925

Amount of contribution (\$)

200

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/25/2020

Full name of contributor

PETER KAPENGA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

901 STOCKWELL, EL PASO TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

07/26/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PETER STEVENSON

**6** Contributor address; City; State; Zip Code

5148 TIMBERWOLF DR, El Paso TX 79903

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

08/07/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PETER STEVENSON

Contributor address; City; State; Zip Code

5148 TIMBERWOLF, El Paso TX 79903

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

EDITOR

Employer (See Instructions)

SELF

Date

07/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

PRISCILLA NORIEGA

Contributor address; City; State; Zip Code

5523 LOVERS LANE, BROWNSVILLE TX 78526

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

TRLA

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RACHEL ORTEGA

Contributor address; City; State; Zip Code

14422 MIGUEL TERRAZAS, EL PASO TX 79938

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

UNDERWRITER

Employer (See Instructions)

PRUDENTIAL

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/13/2020

**5** Full name of contributor

RAMON RIVERA

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

1133 RIO GRANDE, El Paso TX 79902

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

CHEF

**9** Employer (See Instructions)

PIEDMONT

Date

09/16/2020

Full name of contributor

RAMON VILLA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

919 PROSPECT, El Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

FILM MAKER

Employer (See Instructions)

MUVIMON

Date

07/31/2020

Full name of contributor

RAMON VILLA-HERNANDEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

919 PROSPECT, El Paso TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor

RANEEM KARBOJI

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10408 BYWOOD, El Paso TX 79935

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

ADMINISTRATOR

Employer (See Instructions)

CITY OF El Paso

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/15/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RAQUEL ROJO

**6** Contributor address; City; State; Zip Code

641 DAVENTRY CT, EL PASO TX 79928

**7** Amount of contribution (\$)

44

**8** Principal occupation / Job title (See Instructions)

OCCUPATIONAL THERAPIST

**9** Employer (See Instructions)

DOD

Date

09/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RAQUEL ROJO

Contributor address; City; State; Zip Code

641 DAVENTRY CT, EL PASO TX 79928

Amount of contribution (\$)

44

Principal occupation / Job title (See Instructions)

OCCUPATIONAL THERAPIST

Employer (See Instructions)

DOD

Date

08/31/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RAZZU ENGEN

Contributor address; City; State; Zip Code

5131 FAIRFAX AVE, OAKLAND CA 94601

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

FACILITIES MANAGER

Employer (See Instructions)

CITY OF ALBANY

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

REBECCA GLASER

Contributor address; City; State; Zip Code

2709 GOLD AVE, El Paso TX 79930

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

HOMEMAKER

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/20/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

REBECCA GLASER

**6** Contributor address; City; State; Zip Code

2709 GOLD AVE, El Paso TX 79930

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

HOMEMAKER

**9** Employer (See Instructions)

NA

Date

09/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

REBECCA PASILLAS

Contributor address; City; State; Zip Code

2916 FEDERAL, El Paso TX 79930

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

PSYCHOLOGIST

Employer (See Instructions)

SELF

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RENE FIERRO

Contributor address; City; State; Zip Code

4024 CHESTER, El Paso TX 79903

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

RENE KLADZYK

Contributor address; City; State; Zip Code

1214 N KANSAS, El Paso TX 79902

Amount of contribution (\$)

60

Principal occupation / Job title (See Instructions)

REPORTER

Employer (See Instructions)

El Paso MATTERS

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/18/2020

**5** Full name of contributor

RICHARD GENARA

**6** Contributor address;

11021 AQUA CT, El Paso TX 79936

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

15

**8** Principal occupation / Job title (See Instructions)

OPERATIONS CLERK

**9** Employer (See Instructions)

Wells Fargo

Date

09/18/2020

Full name of contributor

RICHARD PROVENCIO

Contributor address;

6213 CADIZ, El Paso TX 79912

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/18/2020

Full name of contributor

RICK CHUMSAE

Contributor address;

5704 VERDE LAGOS PLACE, El Paso TX 79932

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

REALTOR

Employer (See Instructions)

SKYE BROKERAGE

Date

08/15/2020

Full name of contributor

RIGOBERTO DE LA MORA

Contributor address;

609 WILLIAMS, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

8

Principal occupation / Job title (See Instructions)

VISUAL ARTIST

Employer (See Instructions)

SELF

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# MONETARY POLITICAL CONTRIBUTIONS

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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/13/2020

**5** Full name of contributor

ROBERT FLORIDO

**6** Contributor address;

4817 VULCAN, El Paso TX 79904

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

PCA

**9** Employer (See Instructions)

LIFESPAN HOME HEALTH

Date

08/15/2020

Full name of contributor

ROBERT GAUDET

Contributor address;

12828 COZY COVE, El Paso TX 79938

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

LAWYER

Employer (See Instructions)

SELF

Date

09/08/2020

Full name of contributor

ROBERT RODRIGUEZ

Contributor address;

PO Box 7858, ALBUQUERQUE NM 87194

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

PROGRAM OFFICER

Employer (See Instructions)

WKKF

Date

07/15/2020

Full name of contributor

ROMELIA MENDOZA

Contributor address;

327 CHIHUAHUA, El Paso TX 79901

out-of-state PAC (ID#: \_\_\_\_\_)

City; State; Zip Code

Amount of contribution (\$)

40

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

RETIRED

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/19/2020

**5** Full name of contributor

ROSEMARY NEILL

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

901 MESITA, El Paso TX 79902

**7** Amount of contribution (\$)

300

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

09/19/2020

Full name of contributor

ROSEMARY NEILL

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

901 MESITA, El Paso TX 79902

Amount of contribution (\$)

300

Principal occupation / Job title (See Instructions)

ADMINISTRATOR

Employer (See Instructions)

El Paso COMMUNITY FOUNDATION

Date

08/15/2020

Full name of contributor

ROSEMARY ROJAS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

El Paso TX 79904

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor

RUBY MONTANA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

1101 NOBLE ST, El Paso TX 79902

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

LECTURER

Employer (See Instructions)

UTEP & EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/02/2020

**5** Full name of contributor

RUBY MONTANA

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

3402 CRAIGO AVE, EI Paso TX 79904

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

LECTURER

**9** Employer (See Instructions)

UTEP

Date

09/04/2020

Full name of contributor

SAMANTHA GARCIA

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

401 VERDE MAR, EI Paso TX 79912

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

NURSE

Employer (See Instructions)

AVEANNA

Date

09/22/2020

Full name of contributor

SAMANTHA HELD

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

673 PETE PAYAN, EI Paso TX 79912

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

FREE LANCE EDITOR

Employer (See Instructions)

SELF

Date

08/24/2020

Full name of contributor

SAMANTHA ROMERO

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3504 HIXON, EI Paso TX 79902

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

OFFICE MANAGER

Employer (See Instructions)

TEXAS SENATE

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

07/07/2020

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SAMEENA KARMALLY

6 Contributor address; City; State; Zip Code

14 BISHOP GATE, ALLEN TX 75002

7 Amount of contribution (\$)

250

8 Principal occupation / Job title (See Instructions)

ATTORNEY

9 Employer (See Instructions)

SELF

Date

08/06/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SAMEENA KARMALLY

Contributor address; City; State; Zip Code

14 BISHOP GATE, ALLEN TX 75002

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SANDRA CARAVEO

Contributor address; City; State; Zip Code

241 ARISANO, EL PASO TX 79932

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

PROGRAM MANAGER

Employer (See Instructions)

LULAC

Date

07/21/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SANDRA HERRERA

Contributor address; City; State; Zip Code

3336 TAYLOR AVE, El Paso TX 79930

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

EPISD

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/09/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SANDRA WALTMON

**6** Contributor address; City; State; Zip Code

2973 DOUG FORD, El Paso TX 79935

**7** Amount of contribution (\$)

100

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

08/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SARA RUEDA

Contributor address; City; State; Zip Code

2801 JACKSON, El Paso TX 79930

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

CONTENT MARKETING MANAGER

Employer (See Instructions)

HELEN OF TROY

Date

08/25/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SARAH DILLABOUGH

Contributor address; City; State; Zip Code

4448 FINCH WAY, El Paso TX 79922

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

SUSTAINABILITY SPECIALIST

Employer (See Instructions)

QUANTUM ENGINEERING

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SARAH DILLABOUGH

Contributor address; City; State; Zip Code

4448 FINCH WAY, El Paso TX 79922

Amount of contribution (\$)

15

Principal occupation / Job title (See Instructions)

CONSULTANT

Employer (See Instructions)

QUANTUM ENGINEERING

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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**3** Filer ID (Ethics Commission Filers)

**4** Date

09/19/2020

**5** Full name of contributor

SARAH HILL

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

1917 BRENTWOOD, KALAMAZOO MI 49008

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

PROFESSOR

**9** Employer (See Instructions)

WESTERN MICHIGAN UNIVERSITY

Date

08/15/2020

Full name of contributor

SARAH LOVETT

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

829 MIA COURT, El Paso TX

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

STUDENT

Employer (See Instructions)

NA

Date

09/05/2020

Full name of contributor

SAUL GONZALEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

501 REDD RD, El Paso TX 79932

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

MENTAL HEALTH TECH

Employer (See Instructions)

STRATEGIC BEHAVIORAL HEALTH

Date

08/23/2020

Full name of contributor

SEAN DIAZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10004 SINGAPORE, El Paso TX 79925

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/07/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SELF A CHEW

**6** Contributor address; City; State; Zip Code

725 WESTLAKE CT, EL PASO TX 79912

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

EDUCATOR

**9** Employer (See Instructions)

UTEP

Date

09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SERGIO CONTRERAS

Contributor address; City; State; Zip Code

512 Los Angeles, El Paso TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/10/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SHELBY RUFF

Contributor address; City; State; Zip Code

6437 LOS ROBLES, El Paso TX 79912

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

RECRUITER

Employer (See Instructions)

USAA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SOFIA MARQUEZ

Contributor address; City; State; Zip Code

3025 WHEELING, El Paso TX 79930

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

STUDENT

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/22/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SONIA REBELES

**6** Contributor address; City; State; Zip Code

1145 MOHAWK, Los Angeles CA 90026

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

PHYSICIAN

**9** Employer (See Instructions)

SELF

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

SONYA SAUNDERS

Contributor address; City; State; Zip Code

10201 SHIPLEY AVE, El Paso TX 79925

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

STEPHANIE JAMES

Contributor address; City; State; Zip Code

6329 PALO VERDE, #B, El Paso TX 79912

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

TRLA

Date

09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

STEPHANIE TOWNSEND-ALLALA

Contributor address; City; State; Zip Code

1300 N El Paso, El Paso TX 79902

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

TOWNSEND-ALLALA

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# MONETARY POLITICAL CONTRIBUTIONS

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**1** Total pages Schedule A1:  
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**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/16/2020

**5** Full name of contributor

STEPHEN VEITCH

**6** Contributor address;

811 WINTER, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

**7** Amount of contribution (\$)

35

**8** Principal occupation / Job title (See Instructions)

PROFESSOR

**9** Employer (See Instructions)

UTEP

Date

09/09/2020

Full name of contributor

STEVE COOK

Contributor address;

1300 LIKINS DR, El Paso TX 79925

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/16/2020

Full name of contributor

STEVE FISCHER

Contributor address;

525 CORTO WAY, El Paso TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

Date

09/16/2020

Full name of contributor

SUSANA NAVARRO

Contributor address;

75 KINGERY, EL PASO TX 79902

out-of-state PAC (ID#: \_\_\_\_\_)

City;

State;

Zip Code

Amount of contribution (\$)

150

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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

City Clerk Dept.  
10/5/2020 2:26:28 PM

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/03/2020

**5** Full name of contributor

SUZAN KERN

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

2200 PENNSYLVANIA AVE, Washington DC 20037

**7** Amount of contribution (\$)

50

**8** Principal occupation / Job title (See Instructions)

ATTORNEY

**9** Employer (See Instructions)

HUNTON ANDREWS & KURTH

Date

09/14/2020

Full name of contributor

SYLVIA SEARFOSS

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

629 DELEON, El Paso TX 79912

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/15/2020

Full name of contributor

THOMAS SPIECZNY

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

920 BLANCHARD AVE, El Paso TX 79902

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/15/2020

Full name of contributor

TIM HERNANDEZ

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

904 W. YANDELL, El Paso TX 79902

Amount of contribution (\$)

30

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

UTEP

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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10/5/2020 2:26:28 PM

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/07/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

TIM Z. HERNANDEZ

**6** Contributor address; City; State; Zip Code

904 W. YANDELL, El Paso TX 79902

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

PROFESSOR

**9** Employer (See Instructions)

UTEP

Date

09/16/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

TIMOTHY AQUILINA

Contributor address; City; State; Zip Code

1004 KERN, El Paso TX 79902

Amount of contribution (\$)

250

Principal occupation / Job title (See Instructions)

NURSE ANESTHETIST

Employer (See Instructions)

SELF

Date

09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

TONI RAMIREZ

Contributor address; City; State; Zip Code

1481 KING ST, Santa Rosa CA 95404

Amount of contribution (\$)

500

Principal occupation / Job title (See Instructions)

PHYSICIAN

Employer (See Instructions)

COMMUNITY HEALTH CENTER

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VANESSA CAMACHO

Contributor address; City; State; Zip Code

1815 RAYNOLDS, EL PASO TX 79903

Amount of contribution (\$)

100

Principal occupation / Job title (See Instructions)

PROFESSOR

Employer (See Instructions)

EPCC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
09/04/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VANESSA CAMACHO

**6** Contributor address; City; State; Zip Code  
1815 RAYNOLDS, EL PASO TX 79903

**7** Amount of contribution (\$)  
25

**8** Principal occupation / Job title (See Instructions)  
PROFESSOR

**9** Employer (See Instructions)  
EPCC

Date  
09/04/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VANESSA CAMACHO

Contributor address; City; State; Zip Code  
1815 RAYNOLDS, EL PASO TX 79903

Amount of contribution (\$)  
20

Principal occupation / Job title (See Instructions)  
PROFESSOR

Employer (See Instructions)  
EPCC

Date  
09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VANESSA MEDRANO

Contributor address; City; State; Zip Code  
10474 DAVWOOD, EL PASO TX 79925

Amount of contribution (\$)  
10

Principal occupation / Job title (See Instructions)  
NA

Employer (See Instructions)  
NA

Date  
09/11/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VERONICA ABREU

Contributor address; City; State; Zip Code  
513 Santa Clara, San Mateo CA 94403

Amount of contribution (\$)  
50

Principal occupation / Job title (See Instructions)  
ATTORNEY

Employer (See Instructions)  
SQUARE INC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME  
MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
09/04/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VERONICA CAMACHO

**6** Contributor address; City; State; Zip Code  
272 SHADOW MOUNTAIN, El Paso TX 79912

**7** Amount of contribution (\$)  
25

**8** Principal occupation / Job title (See Instructions)  
VIRTUAL ASSISTANT

**9** Employer (See Instructions)  
DIVERSITY & RESILIENCY INSTITUTE

Date  
09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VERONICA CARRILLO

Contributor address; City; State; Zip Code  
1026 E CALIFORNIA, El Paso TX 79902

Amount of contribution (\$)  
35

Principal occupation / Job title (See Instructions)  
ANALYST

Employer (See Instructions)  
UTEP

Date  
07/21/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VERONICA CARRILLO

Contributor address; City; State; Zip Code  
1026 E CALIFORNIA, El Paso TX 79902

Amount of contribution (\$)  
25

Principal occupation / Job title (See Instructions)  
IMPLEMENTATION CONSULTANT

Employer (See Instructions)  
ULTIMATE SOFTWARE

Date  
08/21/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VERONICA CARRILLO

Contributor address; City; State; Zip Code  
1026 E CALIFORNIA, El Paso TX 79902

Amount of contribution (\$)  
25

Principal occupation / Job title (See Instructions)  
IMPLEMENTATION CONSULTANT

Employer (See Instructions)  
ULTIMATE SOFTWARE

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/21/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VERONICA CARRILLO

**6** Contributor address; City; State; Zip Code

1026 E CALIFORNIA, El Paso TX 79902

**7** Amount of contribution (\$)

25

**8** Principal occupation / Job title (See Instructions)

IMPLEMENTATION CONSULTANT

**9** Employer (See Instructions)

ULTIMATE SOFTWARE

Date

09/13/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VERONICA CARRILLO

Contributor address; City; State; Zip Code

1026 E CALIFORNIA, El Paso TX 79902

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

CONSULTANT

Employer (See Instructions)

ULTIMATE SOFTWARE

Date

09/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VERONICA CARRILLO

Contributor address; City; State; Zip Code

1026 E CALIFORNIA, El Paso TX 79902

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

CONSULTANT

Employer (See Instructions)

ULTIMATE SOFTWARE

Date

09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VERONICA SAENZ

Contributor address; City; State; Zip Code

3657 TIERRA BERLIN, EL PASO TX 79938

Amount of contribution (\$)

20

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/19/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VICTORIA ANDREE-MARTINEZ

**6** Contributor address; City; State; Zip Code

1220 MESITA, El Paso TX 79902

**7** Amount of contribution (\$)

20

**8** Principal occupation / Job title (See Instructions)

ARTIST

**9** Employer (See Instructions)

SELF

Date

08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VIRGINIA KONDO

Contributor address; City; State; Zip Code

5206 BEALS, El Paso TX 79924

Amount of contribution (\$)

30

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

Date

08/28/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VIVIAN NAVA

Contributor address; City; State; Zip Code

110 FIRST ST SE, Washington DC 20003

Amount of contribution (\$)

70

Principal occupation / Job title (See Instructions)

DIRECTOR

Employer (See Instructions)

NATIONAL COUNCIL ON AGING

Date

07/29/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VONA VAN CLEEF

Contributor address; City; State; Zip Code

4800 N STANTON, #200, El Paso TX 79902

Amount of contribution (\$)

10

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

NA

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/29/2020

**5** Full name of contributor

VONA VAN CLEEF

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

4800 N STANTON, El Paso TX 79902

**7** Amount of contribution (\$)

10

**8** Principal occupation / Job title (See Instructions)

RETIRED

**9** Employer (See Instructions)

NA

Date

09/17/2020

Full name of contributor

WALLI HALEY

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3123 BROADMOOR VALLEY RD, Colorado Springs, CO

Amount of contribution (\$)

25

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

STATE OF COLORADO

Date

08/16/2020

Full name of contributor

WESLEY LAWRENCE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

10900 STONEBRIDGE, EL PASO TX 79934

Amount of contribution (\$)

50

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

09/09/2020

Full name of contributor

WILLIAM MOUNCE

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

600 SUNLAND PARK DR, El Paso TX 79912

Amount of contribution (\$)

1000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date  
  
08/29/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
WILLIAM NAESS  
**6** Contributor address; City; State; Zip Code  
1062 PARK PLACE, BROOKLYN NY 11213

**7** Amount of contribution (\$)  
  
100

**8** Principal occupation / Job title (See Instructions)  
TEACHER

**9** Employer (See Instructions)  
New York City DEPT OF EDUCATION

Date  
  
08/15/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
XAVIER MIRANDA  
Contributor address; City; State; Zip Code  
6625 SOUTHWIND, EL PASO TX 79912

Amount of contribution (\$)  
  
20

Principal occupation / Job title (See Instructions)  
TEACHER

Employer (See Instructions)  
EPISD

Date  
  
09/11/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
YOUNG WHAN CHOI  
Contributor address; City; State; Zip Code  
617 AILEEN ST, OAKLAND CA 74609

Amount of contribution (\$)  
  
200

Principal occupation / Job title (See Instructions)  
EDUCATOR

Employer (See Instructions)  
OAKLAND UNITED

Date  
  
09/22/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ZACH GONZALEZ  
Contributor address; City; State; Zip Code  
435 TOWNSEND TERRACE, LAS CRUCES NM 88006

Amount of contribution (\$)  
  
25

Principal occupation / Job title (See Instructions)  
OWNER

Employer (See Instructions)  
BLUEBIRD RUNNING CO

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**114**

**2** FILER NAME

MS VERONICA CARBAJAL

**3** Filer ID (Ethics Commission Filers)

**4** Date

09/22/2020

**5** Full name of contributor

ZAETA MORALES

out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

2800 DEVILS TOWER CIR, El Paso TX 79904

**7** Amount of contribution (\$)

**5**

**8** Principal occupation / Job title (See Instructions)

NA

**9** Employer (See Instructions)

NA

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
2

2 FILER NAME  
MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
09/16/2020

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Texas Democratic Party

7 Contributor address; City; State; Zip Code  
1106 LAVACA, SUITE 100, AUSTIN TX 78701

8 Amount of Contribution \$  
1580

9 In-kind contribution description  
Voter Activation Network (VAN)  
provides software  
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
VOTER ACTIVATION NETWORK/VOTEBUILDER

11 Employer (FOR NON-JUDICIAL) (See Instructions)  
Texas Democratic Party

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
09/05/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
JAZMIN MESA & INGRID LEYVA

Contributor address; City; State; Zip Code  
2516 PERSHING, El Paso TX 79903

Amount of Contribution \$  
12000

In-kind contribution description  
PRODUCTION OF CAMPAIGN VIDEO  
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
PHOTOGRAPHY

Employer (FOR NON-JUDICIAL) (See Instructions)  
SELF

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

City Clerk Dept.  
10/5/2020 2:26:28 PM

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
2

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

09/05/2020

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

VIRIDIANA VILLA

7 Contributor address; City; State; Zip Code

120 S STANTON, APT 207, El Paso TX 79901

8 Amount of Contribution \$

100

9 In-kind contribution description

CAMPAIGN VIDEO  
AUDIO FILE  
PRODUCTION

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

GRAPHIC DESIGNER

11 Employer (FOR NON-JUDICIAL) (See Instructions)

SELF

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

0

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of Pledge \$

9 In-kind contribution description

7 Pledgor address; City; State; Zip Code

Check 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 contribution description

Pledgor address; City; State; Zip Code

Check 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 contribution description

Pledgor address; City; State; Zip Code

Check 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 contribution description

Pledgor address; City; State; Zip Code

Check 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.

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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

MS VERONICA CARBAJAL

3 Filer ID (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 (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

not applicable

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 (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

City Clerk Dept.  
10/5/2020 2:26:28 PM

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/03/2020</b>	<b>5</b> Payee name <b>ACT BLUE</b>	
<b>6</b> Amount (\$) <b>39.45</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 441146, SOMERVILLE MA 02144</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>SOLICITATION/FUNDRAISING EXPENSE</b>	<b>(b)</b> Description <b>SERVICE CHARGE</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>07/10/2020</b>	<b>Payee name</b> <b>ACT BLUE</b>	
<b>Amount (\$)</b> <b>200</b>	<b>Payee address; City; State; Zip Code</b> <b>PO Box 441146, SOMERVILLE MA 02144</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>SOLICITATION/FUNDRAISING</b>	Description <b>SERVICE CHARGE</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>08/05/2020</b>	<b>Payee name</b> <b>ACT BLUE</b>	
<b>Amount (\$)</b> <b>31.51</b>	<b>Payee address; City; State; Zip Code</b> <b>PO Box 441146, SOMERVILLE MA 02144</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>SOLICITATION/FUNDRAISING</b>	Description <b>SERVICE CHARGE</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/03/2020	<b>5</b> Payee name ACT BLUE	
<b>6</b> Amount (\$) 100.17	<b>7</b> Payee address; City; State; Zip Code PO Box 441146, SOMERVILLE MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) SOLICITATION/FUNDRAISING	<b>(b)</b> Description SERVICE CHARGE
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/10/2020	Payee name AMAZON.COM	
Amount (\$) 238.16	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description CAMPAIGN SIGN BRACKETS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/14/2020	Payee name BRANDON BAILEY JOHNSON	
Amount (\$) 175	Payee address; City; State; Zip Code PO Box 12265, El Paso TX 79913	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description MUSIC PRODUCTION
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/01/2020	<b>5</b> Payee name BRYAN MONROE	
<b>6</b> Amount (\$) 71.99	<b>7</b> Payee address; City; State; Zip Code 10316 BON AIRE DR, El Paso TX 79924	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description CAMPAIGN SIGN WIRES
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/25/2020	Payee name BRYAN MONROE	
Amount (\$) 250	Payee address; City; State; Zip Code 10316 BON AIRE DR, El Paso TX 79924	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES	Description CAMPAIGN STAFF
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/29/2020	Payee name BRYAN MONROE	
Amount (\$) 250	Payee address; City; State; Zip Code 10316 BON AIRE DR, El Paso TX 79924	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES	Description CAMPAIGN STAFF
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/10/2020		<b>5</b> Payee name BRYAN MONROE			
<b>6</b> Amount (\$) 250		<b>7</b> Payee address; City; State; Zip Code 10316 BON AIRE DR, El Paso TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) SALARIES/WAGES		<b>(b)</b> Description CAMPAIGN STAFF		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/17/2020		Payee name CAFE MAYAPAN			
Amount (\$) 40		Payee address; City; State; Zip Code 2000 TEXAS, El Paso TX 79901			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		Description CAMPAIGN		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 08/11/2020		Payee name CITY OF El Paso			
Amount (\$) 500		Payee address; City; State; Zip Code 300 N CAMPBELL, El Paso TX 79901			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FEES		Description GENERAL ELECTION FILING		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 07/17/2020		<b>5</b> Payee name DISPLAY SERVICES, INC.			
<b>6</b> Amount (\$) 297.69		<b>7</b> Payee address; City; State; Zip Code 821 N RAYNOR, EI Paso TX 79903			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) PRINTING EXPENSE		<b>(b)</b> Description CAMPAIGN SIGNS		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 08/01/2020		Payee name DOMINIC CHACON			
Amount (\$) 500		Payee address; City; State; Zip Code 5525 PLAINVIEW DR, EL PASO TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 08/18/2020		Payee name DOMINIC CHACON			
Amount (\$) 500		Payee address; City; State; Zip Code 5525 PLAINVIEW, EL PASO TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/29/2020		<b>5</b> Payee name DOMINIC CHACON			
<b>6</b> Amount (\$) 500		<b>7</b> Payee address; City; State; Zip Code 5525 PLAINVIEW DR, EL PASO TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) SALARIES/WAGES		<b>(b)</b> Description CAMPAIGN STAFF		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 09/12/2020		Payee name DOMINIC CHACON			
Amount (\$) 500		Payee address; City; State; Zip Code 5525 PLAINVIEW DR, EL PASO TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/01/2020		Payee name DOMINIC CHACON			
Amount (\$) 500		Payee address; City; State; Zip Code 5525 PLAINVIEW DR, EL PASO TX 79924			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/15/2020</b>	<b>5</b> Payee name <b>DOMINIC CHACON</b>	
<b>6</b> Amount (\$) <b>500</b>	<b>7</b> Payee address; City; State; Zip Code <b>5525 PLAINVIEW DR, EL PASO TX 79924</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	<b>(b)</b> Description <b>CAMPAIGN STAFF</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>08/04/2020</b>	<b>Payee name</b> <b>EI Paso MAIL &amp; PRINT SERVICE</b>	
<b>Amount (\$)</b> <b>319.34</b>	<b>Payee address; City; State; Zip Code</b> <b>1144 VISTA DE ORO, STE A, EI Paso TX 79935</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	Description <b>CAMPAIGN BUTTONS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>09/01/2020</b>	<b>Payee name</b> <b>EI Paso MAIL &amp; PRINT SERVICE</b>	
<b>Amount (\$)</b> <b>2356.6</b>	<b>Payee address; City; State; Zip Code</b> <b>1144 VISTA DE ORO, STE A, EI Paso TX 79935</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>	Description <b>CAMPAIGN DOOR HANGERS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/12/2020		<b>5</b> Payee name EI Paso MAIL & PRINT SERVICE			
<b>6</b> Amount (\$) 1908.45		<b>7</b> Payee address; City; State; Zip Code 1144 VISTA DE ORO, STE A, EI Paso TX 79935			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) PRINTING		<b>(b)</b> Description CAMPAIGN MATERIALS		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 08/24/2020		Payee name EI Paso SLI SIGN LANGUAGE			
Amount (\$) 260		Payee address; City; State; Zip Code 6404 Cheyenne Trl EI Paso Texas 79928			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description CAMPAIGN		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 08/14/2020		Payee name FACTOR PRINTS			
Amount (\$) 350		Payee address; City; State; Zip Code 4400 Chester Ave. EI Paso, Texas 79903			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description CAMPAIGN FACE MASKS		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/25/2020</b>	<b>5</b> Payee name <b>FACTOR PRINTS</b>	
<b>6</b> Amount (\$) <b>1288.18</b>	<b>7</b> Payee address; City; State; Zip Code <b>4400 Chester Ave. El Paso, Texas 79903</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>	<b>(b)</b> Description <b>CAMPAIGN FACE MASKS</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>El Paso MAYOR</b>
<b>Date</b> <b>08/04/2020</b>	<b>Payee name</b> <b>GOOGLE</b>	
<b>Amount (\$)</b> <b>2.06</b>	<b>Payee address; City; State; Zip Code</b> <b>1600 Amphitheatre Parkway, Mountain View, CA</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description <b>OFFICE SUPPLIES</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>El Paso MAYOR</b>
<b>Date</b> <b>09/02/2020</b>	<b>Payee name</b> <b>GOOGLE</b>	
<b>Amount (\$)</b> <b>20.21</b>	<b>Payee address; City; State; Zip Code</b> <b>1600 Amphitheatre Parkway, Mountain View, CA</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description <b>OFFICE SUPPLIES</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>El Paso MAYOR</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/01/2020</b>	<b>5</b> Payee name <b>GRACIELA BLANDON</b>	
<b>6</b> Amount (\$) <b>250</b>	<b>7</b> Payee address; City; State; Zip Code <b>1337 DESERT CANYON, EI Paso TX 79912</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	<b>(b)</b> Description <b>CAMPAIGN STAFF</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>08/29/2020</b>	<b>Payee name</b> <b>GRACIELA BLANDON</b>	
<b>Amount (\$)</b> <b>250</b>	<b>Payee address; City; State; Zip Code</b> <b>1337 DESERT CANYON, EI Paso TX 79912</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	Description <b>CAMPAIGN STAFF</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>09/15/2020</b>	<b>Payee name</b> <b>GRACIELA BLANDON</b>	
<b>Amount (\$)</b> <b>250</b>	<b>Payee address; City; State; Zip Code</b> <b>1337 DESERT CANYON, EI Paso TX 79912</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	Description <b>CAMPAIGN STAFF</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>07/01/2020</b>	<b>5</b> Payee name <b>GRACIELA BLANDON</b>	
<b>6</b> Amount (\$) <b>250</b>	<b>7</b> Payee address; City; State; Zip Code <b>1337 DESERT CANYON, EI Paso TX 79912</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	<b>(b)</b> Description <b>CAMPAIGN STAFF</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>07/15/2020</b>	<b>Payee name</b> <b>GRACIELA BLANDON</b>	
<b>Amount (\$)</b> <b>250</b>	<b>Payee address; City; State; Zip Code</b> <b>1337 DESERT CANYON, EI Paso TX 79912</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>SALARIES/WAGES</b>	Description <b>CAMPAIGN STAFF</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>09/22/2020</b>	<b>Payee name</b> <b>HARLAND CLARKE CHECKS</b>	
<b>Amount (\$)</b> <b>48.02</b>	<b>Payee address; City; State; Zip Code</b> <b>15955 La Cantera Parkway San Antonio, TX 78256</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>ACCOUNTING/BANKING</b>	Description <b>NEW CHECKS</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/06/2020	<b>5</b> Payee name IDEA SPREADERS	
<b>6</b> Amount (\$) 1706.02	<b>7</b> Payee address; City; State; Zip Code 3580 OXCART RUN, EI Paso TX	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	<b>(b)</b> Description DIGITAL CAMPAIGN
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought EI Paso MAYOR
<b>Date</b> 08/29/2020	<b>Payee name</b> JEAN-CARLO TIRADO	
<b>Amount (\$)</b> 500	<b>Payee address; City; State; Zip Code</b> 12285 ROBERTA LYNNE, EI Paso TX 79936	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES	Description CAMPAIGN STAFF
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought EI Paso MAYOR
<b>Date</b> 09/14/2020	<b>Payee name</b> JEAN-CARLO TIRADO	
<b>Amount (\$)</b> 250	<b>Payee address; City; State; Zip Code</b> 12285 ROBERTA LYNNE, EI Paso TX 79936	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES	Description CAMPAIGN STAFF
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought EI Paso MAYOR

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/18/2020		<b>5</b> Payee name JOSE MONTOYA			
<b>6</b> Amount (\$) 100		<b>7</b> Payee address; City; State; Zip Code 2500 ALTURA, EI Paso TX 79930			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING		<b>(b)</b> Description PRINTS		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 08/31/2020		Payee name KIKI'S RESTAURANT			
Amount (\$) 100		Payee address; City; State; Zip Code 2719 N PIEDRAS, EL PASO TX			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE		Description CAMPAIGN		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	
Date 09/10/2020		Payee name Office Depot			
Amount (\$) 140.71		Payee address; City; State; Zip Code 801 SUNLAND PARK, EI Paso TX 79912			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD		Description OFFICE SUPPLIES		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought EI Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/08/2020	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) 140.71	<b>7</b> Payee address; City; State; Zip Code 801 SUNLAND PARK, El Paso TX 79912	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	<b>(b)</b> Description OFFICE SUPPLIES
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/24/2020	Payee name PETER PIPER PIZZA	
Amount (\$) 35.93	Payee address; City; State; Zip Code 119 N BALBOA, El Paso TX 79912	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE	Description CAMPAIGN
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/20/2020	Payee name REGENCY PRINTING	
Amount (\$) 127.74	Payee address; City; State; Zip Code 2313 N PIEDRAS, EL PASO TX 79930	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) PRINTING EXPENSE	Description CAMPAIGN BOOKLETS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/13/2020		<b>5</b> Payee name REGENCY PRINTING			
<b>6</b> Amount (\$) 81.19		<b>7</b> Payee address; City; State; Zip Code 2313 N PIEDRAS, EL PASO TX 79930			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		<b>(b)</b> Description CAMPAIGN POSTERS		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/01/2020		Payee name RODOLFO PARRA, JR,			
Amount (\$) 250		Payee address; City; State; Zip Code 3721 PERA AVE, El Paso TX 79905			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/17/2020		Payee name RODOLFO PARRA, JR.			
Amount (\$) 250		Payee address; City; State; Zip Code 3721 PERA AVE, El Paso TX 79905			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) SALARIES/WAGES		Description CAMPAIGN STAFF		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 07/15/2020		<b>5</b> Payee name RODOLFO PARRA, JR.			
<b>6</b> Amount (\$) 250		<b>7</b> Payee address; City; State; Zip Code 3721 PERA AVE, El Paso TX 79905			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) SALARIES/WAGES		<b>(b)</b> Description CAMPAIGN STAFF		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 08/12/2020		Payee name SQUARESPACE			
Amount (\$) 28.15		Payee address; City; State; Zip Code 8 CLARKSON ST, New York, NY 10014			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD		Description CAMPAIGN WEBSITE		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 09/14/2020		Payee name SQUARESPACE			
Amount (\$) 28.15		Payee address; City; State; Zip Code 8 CLARKSON ST, New York, NY 10014			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD		Description CAMPAIGN WEBSITE		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/04/2020	<b>5</b> Payee name TAYLOR ENTERPRISES	
<b>6</b> Amount (\$) 1500	<b>7</b> Payee address; City; State; Zip Code 7305 Onate Ct NE, Albuquerque NM 87109	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD	<b>(b)</b> Description PHONE BANKING SOFTWARE USAGE
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 08/10/2020	Payee name THE Home Depot	
Amount (\$) 148.29	Payee address; City; State; Zip Code 7545 N MESA, El Paso TX 79912	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description CAMPAIGN SIGN BRACKETS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR
Date 09/16/2020	Payee name Texas Democratic Party	
Amount (\$) 1400	Payee address; City; State; Zip Code 1106 LAVACA, SUITE 100, AUSTIN TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) CAMPAIGN SOFTWARE	Description To augment campaigning and get-out-the-vote operations.
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name VERONICA CARBAJAL	Office sought El Paso MAYOR

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME MS VERONICA CARBAJAL		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/14/2020		<b>5</b> Payee name United States POSTAL SERVICE			
<b>6</b> Amount (\$) 33		<b>7</b> Payee address; City; State; Zip Code 3011 E YANDELL, EL PASO TX 79903			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD		<b>(b)</b> Description POSTAGE STAMPS		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/31/2020		Payee name WELLS FARGO BANK			
Amount (\$) 14		Payee address; City; State; Zip Code 2340 N MESA, El Paso TX 79902			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ACCOUNTING/BANKING		Description SERVICE CHARGE		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	
Date 07/15/2020		Payee name ZOOM			
Amount (\$) 15.99		Payee address; City; State; Zip Code 55 ALMADEN BLVD, San Jose CA 95113			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OFFICE OVERHEAD		Description CAMPAIGN COMMUNICATION		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name VERONICA CARBAJAL		Office sought El Paso MAYOR	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>08/17/2020</b>	<b>5</b> Payee name <b>ZOOM</b>	
<b>6</b> Amount (\$) <b>15.99</b>	<b>7</b> Payee address; City; State; Zip Code <b>55 ALMADEN BLVD, San Jose CA 95113</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	<b>(b)</b> Description <b>CAMPAIGN COMMUNICATION</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b> <b>09/15/2020</b>	<b>Payee name</b> <b>ZOOM</b>	
<b>Amount (\$)</b> <b>15.99</b>	<b>Payee address;</b> City; State; Zip Code <b>55 ALMADEN BLVD, San Jose CA 95113</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description <b>CAMPAIGN COMMUNICATION</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>VERONICA CARBAJAL</b>	Office sought <b>EI Paso MAYOR</b>
<b>Date</b>	<b>Payee name</b>	
<b>Amount (\$)</b>	<b>Payee address;</b> City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: 0	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
--	----

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:

0

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: 0	<b>2</b> FILER NAME MS VERONICA CARBAJAL	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address;	City;	State;	Zip Code
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
------------------------------	------------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address;	City;	State;	Zip Code
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<b>TYPE OF EXPENDITURE</b>	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
----------------------------	------------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <b>0</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule H: <b>0</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Business name	
<b>6</b> Amount (\$)	<b>7</b> Business address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: <b>0</b>	<b>2</b> FILER NAME <b>MS VERONICA CARBAJAL</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	--	--

<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$)	<b>7</b> Payee address;	City	State	Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
---	--	--

Date	Payee name
------	------------

Amount (\$)	Payee address;	City	State	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
-------------------------------	--	--

Date	Payee name
------	------------

Amount (\$)	Payee address;	City	State	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
-------------------------------	--	--

Date	Payee name
------	------------

Amount (\$)	Payee address;	City	State	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
-------------------------------	--	--

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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

0

2 FILER NAME

MS VERONICA CARBAJAL

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received  Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received  Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received  Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received  Check if political contribution returned to filer

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# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:  
**0**

2 FILER NAME

**MS VERONICA CARBAJAL**

3 Filer ID (Ethics Commission Filers)

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

5 Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

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 A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

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

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

Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

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

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# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

1 C/OH NAME

MS VERONICA CARBAJAL

2 Filer ID (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

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