

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

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

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

5

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: **MR.** FIRST: **JAMES** MI: **E**
 NICKNAME: **JIM** LAST: **SUERKEN** SUFFIX:

OFFICE USE ONLY

Date Received

CITY CLERK DEPT.
07 JUN - 1 PM 12/12

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: **2000 SAUL KLEINFELD #311** APT / SUITE #: **EL PASO, TX 79936** CITY: STATE: ZIP CODE

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: **(915)** PHONE NUMBER: **449-0556** EXTENSION:

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: **MR.** FIRST: **PRESI** MI: **ORTEGA**
 NICKNAME: LAST: SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): **11628 LAURA MARIE** APT / SUITE #: **EL PASO, TX 79936** CITY: STATE: ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE: **(915)** PHONE NUMBER: **490-4907** EXTENSION:

9 REPORT TYPE

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

10 PERIOD COVERED

Month Day Year: **5 / 5 / 2007** THROUGH Month Day Year: **5 / 31 / 2007**

11 ELECTION

ELECTION DATE: Month Day Year: **6 / 9 / 2007** ELECTION TYPE: Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

CITY REPRESENTATIVE DISTRICT 5

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••

Name

Address / PO Box: Apt. / Suite #: City: State: Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

JAMES SUERKEN

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

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

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18 CONTRIBUTION TOTALS

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

\$ N/A

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

\$ 9675.00

EXPENDITURE TOTALS

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

\$ ITEMIZED

4. TOTAL POLITICAL EXPENDITURES

\$ 8215.38

CONTRIBUTION BALANCE

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

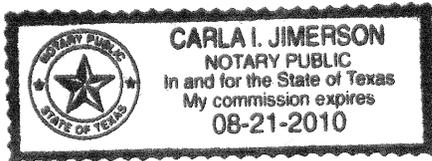
\$ 5417.24

OUTSTANDING LOAN TOTALS

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

\$ N/A

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said James Suerken, this the 15th day of June, 2007, to certify which, witness my hand and seal of office.

Carla I. Jimerson Signature of officer administering oath
Carla I. Jimerson Printed name of officer administering oath
notary Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2	
2 FILER NAME JAMES SUEPKE		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) * SEE ATTACHED *	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

CITY CLERK
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 DEPT

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

Political Contributions Other Than Pledges or Loans Schedule A
Jim Suerken Campaign

<u>Last Name</u>	<u>First Name</u>	<u>Address</u>	<u>Amount</u>	<u>Date</u>
Fernandez	Miguel	7101 N. Mesa No. 541 El Paso, Texas 79912	\$1,000.00	5/12/2007
Weber	Linda	11040 Mirage Ct. El Paso, Texas 79936	\$500	5/12/2007
Saab	Robert	8340 Gateway East El Paso, Texas 79907	\$750	5/12/2007
Hunt	Marcus	4935 Vista Del Monte El Paso, Texas 79922	\$250	5/12/2007
Walker	Kathryn	5231 Country Oaks Dr. El Paso, Texas 79932	\$100	5/12/2007
Mora	William	1612 Billy Casper El Paso, Texas 79936	\$250	5/12/2007
Katzman	Dexter	6720 Isla Del Rey El Paso, Texas 79912	\$100	5/12/2007
Stewart	J.O.	124 W. Castellano Dr. Ste 100 El Paso, Texas 79912	\$500	5/14/2007
Jobe	Stanley	PO Box 3318 El Paso, Texas 79923	\$500	5/15/2007
Herrera	Mike	4410 Trowbridge Ave. El Paso, Texas 79903	\$150	5/15/2007
Escobar	Paul	1100 Ranger Trail El Paso, Texas 79907	\$75	5/15/2007
Sanders	C. Feliz	5015 Meadowlark El Paso, Texas 79922	\$500	5/12/2007
Johnson II	Jesse	10900 Reef Sands El Paso, Texas 79924	\$250	5/17/2007
Gomez	Carlos	11420 Fred Marti El Paso, Texas 79907	\$250	5/17/2007
El Paso Assn. of Builders PAC		6046 Surety Dr. El Paso, Texas 79905	\$2,000	5/25/2007
Moore	Richard	PO Box 533 Manchester, VT 05254	\$500	5/24/2007
Figueroa	Cecilia	4224 Larchmont Dr. El Paso, Texas 79902	\$250	5/17/2007
Lauterbach	Steve	712 Yorkshire Ct. El Paso, Texas 79922	\$250	5/17/2007
Marcus	Clement	824 Dulcinea Ct. El Paso, Texas 79922	\$250.00	5/17/2007
Marcus	Meyer	6500 Montana Ave. El Paso, Texas 79925	\$250	5/17/2007
Walker	Scott	1011 Kelly Way El Paso, Texas 79932	\$250	5/18/2007
Carrasco	E.N.	2301 Bert Yancey El Paso, Texas 79936	\$250	5/17/2007
Sanders	M. Elizabeth	320 Lindberg Ave. El Paso, Texas 79932	\$500	5/12/2007

Total Contributions This Period: \$9,675.00

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POLITICAL EXPENDITURES

CITY CLERK DEPT **SCHEDULE F**

07 JUN -1 PM 12:12

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 1
2 FILER NAME JAMES SUERKEN		3 ACCOUNT # (Ethics Commission filers)
4 Date 05/09/07	5 Payee name MICHELANGELO'S LIL ITALY 6 Payee address; City; State; Zip Code 3512 N. YARBROUGH DR. EL PASO, TX 79925	7 Amount (\$) 255.47
8 Purpose of payment (See instructions regarding type of information required.) CAMPAIGN PARTY ELECTION NIGHT (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/22/07	Payee name TWO TON CREATIVITY Payee address; City; State; Zip Code 500 N. OREGON 2ND FLOOR EL PASO, TX 79901	Amount (\$) 3368.61
Purpose of payment (See instructions regarding type of information required.) REPRINT AND MAILING OF RUN-OFF MAILER (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/24/07	Payee name TWO TON CREATIVITY Payee address; City; State; Zip Code 500 N. OREGON 2ND FLOOR EL PASO, TX 79901	Amount (\$) 3324.60
Purpose of payment (See instructions regarding type of information required.) DESIGN & PRINTING OF RUN-OFF MAILER (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/24/07	Payee name TWO TON CREATIVITY Payee address; City; State; Zip Code 500 N. OREGON 2ND FLOOR EL PASO, TX 79901	Amount (\$) 1266.70
Purpose of payment (See instructions regarding type of information required.) MAILING SERVICES (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		