JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received

CITY CLERK DEPT. 05 MAY 27 PM 1:2

Date Hand-delivered or Date postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST | MI
ODELL S

NICKNAME | LAST | SUFFIX
HOLMES JR

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
493 TIMBER OAKS
EL PASO TX 79932

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE | PHONE NUMBER | EXTENSION
(915) 585-8874

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI
ODELL S

NICKNAME | LAST | SUFFIX
HOLMES JR

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
493 TIMBER OAKS
EL PASO TX 79932

8 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION
(915) 585-8874

9 REPORT TYPE

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

10 PERIOD COVERED

Month Day Year: 5 / 1 / 05 THROUGH Month Day Year: 6 / 4 / 05

11 ELECTION

ELECTION DATE Month Day Year: 6 / 4 / 05

ELECTION TYPE: ☐ Primary ☑ Runoff ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): JUDGE - MUNICIPAL COURT OF APPEALS

13 OFFICE SOUGHT (if known)

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: N/A

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

☐ additional pages

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

CITY CLERK DEPT
05 MAY 27 PM 1:21

15 C/OH NAME ODELL S HOLMES JR

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ —
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2332.00 ~~1500.00~~
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ —
	4. TOTAL POLITICAL EXPENDITURES	$ 21702.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 1622.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 3000.00

19 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.

KIM D. RAMIREZ
Notary Public, State of Texas
My Commission Expires
March 13, 2006

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ODELL HOLMES JR, this the 27 day of MAY, 2005, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath
	Kim D. Ramirez	Notary Public

Printed on recycled paper

Revised 11/21/2003

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

CITY CLERK DEPT.
05 MAY 27 PM 1:21

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME: Odell S. Holmes Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)

9 Contributor's principal occupation	10 Contributor's job title
11 Contributor's employer/law firm	12 Law firm of contributor's spouse (if any)
13 If contributor is a child, law firm of parent(s) (if any)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Contributor's principal occupation	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Contributor's principal occupation	Contributor's job title
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

see attached

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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PLEDGED CONTRIBUTIONS (JUDICIAL) SCHEDULE B (J)

CITY CLERK DEPT.
05 MAY 27 PM 1:21

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule B(J):

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Pledgor's principal occupation

Pledgor's job title

Pledgor's employer/law firm

Law firm of pledgor's spouse (if any)

If pledgor is a child, law firm of parent(s) (if any)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Pledgor's principal occupation

Pledgor's job title

Pledgor's employer/law firm

Law firm of pledgor's spouse (if any)

If pledgor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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LOANS (JUDICIAL)

CITY CLERK DEPT.
05 MAY 27 PM 1:21

SCHEDULE E (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E(J):

2 FILER NAME ODELL S. HOLMES JR

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $ 3000.00

5 Date of loan 3/7/05

6 Is lender a financial institution? Y N

7 Name of lender ODELL S HOLMES JR ☐ out-of-state PAC (ID#:)

8 Lender address; City; State; Zip Code 493 TIMBER OAKS EL PASO TX 79932

9 Loan Amount ($) 3000.00

10 Interest rate -0-

11 Maturity date NONE

12 Lender's Principal Occupation

13 Lender's Job Title

14 Lender's Employer/Law Firm

15 Law Firm of lender's spouse (if any)

16 If lender is child, law firm of parent(s) (if any)

17 Description of Collateral ☑ none

18 GUARANTOR INFORMATION ☑ not applicable

19 Name of guarantor

20 Guarantor address; City; State; Zip Code

21 Amount Guaranteed ($)

22 Guarantor's Principal Occupation

23 Guarantor's Job Title

24 Guarantor's Employer/Law Firm

25 Law Firm of guarantor's spouse (if any)

26 If guarantor is child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

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POLITICAL EXPENDITURES

CITY CLERK DEPT.

05 MAY 27 PM 1:21

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: ODELL S. HOLMES JR

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/2/05	ODELL HOLMES JR 1493 TIMBER OAKS EL PASO TX	500.00

8 Purpose of payment (See instructions regarding type of information required.): PRODUCTION - TV COMMERCIALS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/9/05	FAST SIGNS 4224 MESA ST EL PASO TX 79902	400.00

Purpose of payment (See instructions regarding type of information required.): POL. SIGNS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/16/05	CLEAR CHANNEL RADIO 4045 N. MESA EL PASO TX	1518.10

Purpose of payment (See instructions regarding type of information required.): RADIO ADS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/18/05	ODELL S. HOLMES JR 493 TIMBER OAKS EL PASO TX 79932	370.

Purpose of payment (See instructions regarding type of information required.): STAMPS

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

05 MAY 27 PM 1:21

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Robert S Hermes Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/18/05	ERNIE GARCIA v BALTAZAR HERNANDEZ El Paso Tx	250.00

8 Purpose of payment (See instructions regarding type of information required.): POLITICAL CONSULT

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/18/05	KOBL 2201 E Wyoming El Paso Tx 79903	1313.25

Purpose of payment (See instructions regarding type of information required.): TV ADS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/18/05	UNIVISION RADIO 2211 Missouri El Paso Tx 79903	931.24

Purpose of payment (See instructions regarding type of information required.): RADIO ADS

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/19/05	KTSM TV 801 W. Oregon El Paso Tx 79902	1100.75

Purpose of payment (See instructions regarding type of information required.)

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

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

CITY CLERK DEPT.
05 MAY 27 PM 1:21

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: OBEL S. HOLMES JR

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/19/05	KVIA 4140 RIO BRAVO EL PASO TX 79902	680.00

8 Purpose of payment (See instructions regarding type of information required.)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/20/05	MITHOFF-BURTON 4105 RIO BRAVO EL PASO TX 79902	3360.00

Purpose of payment (See instructions regarding type of information required.)
BROCHURES/MAILING

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

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

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

CITY CLERK DEPT.
05 MAY 27 PM 1:21

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule G:

2 FILER NAME Odell S. Holmes Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name 6 Payee address; City; State; Zip Code 7 Purpose of expenditure	8 Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure	Amount ($) ☐ Reimbursement from political contributions intended

None

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

CITY CLERK DEPT. 05 MAY 27 PM 1:21

SCHEDULE H

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule H:

2 FILER NAME: Odell S. Holmes Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Business name / 6 Business address; City; State; Zip Code	7 Amount ($)

8 Purpose of payment (See instructions regarding type of information required.)	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Business name / Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

NONE

Date	Business name / Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Business name / Business address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

CITY CLERK DEPT.
05 MAY 27 PM 1:21

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule I:

2 FILER NAME JOHN S. HOLMES JR

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)
Date	Payee name / Payee address; City; State; Zip Code / Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name / Payee address; City; State; Zip Code / Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name / Payee address; City; State; Zip Code / Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)
Date	Payee name / Payee address; City; State; Zip Code / Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)

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CREDITS (optional)

CITY CLERK DEPT.
05 MAY 27 PM 1:22

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule K:

2 FILER NAME Joe E. Holmes Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payor name 6 Payor address; City; State; Zip Code 7 Reason for credit	8 Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)
Date	Payor name Payor address; City; State; Zip Code Reason for credit	Amount ($)

NONE

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OUTSTANDING LOANS

CITY CLERK DEPT.

05 MAY 27 PM 1:22

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule L:

2 FILER NAME: ODELL S HOLMES JR

3 ACCOUNT # (Ethics Commission filers)

LENDER INFORMATION	4 Name of lender: ODELL S. HOLMES JR 5 Lender address: 493 TIMBER OAKS; City: EL PASO; State: TX; Zip Code: 79932
GUARANTOR INFORMATION ☑ not applicable	6 Name of guarantor: 7 Guarantor address; City; State; Zip Code
LENDER INFORMATION	Name of lender: Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor: Guarantor address; City; State; Zip Code
LENDER INFORMATION	Name of lender: Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor: Guarantor address; City; State; Zip Code
LENDER INFORMATION	Name of lender: Lender address; City; State; Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor: Guarantor address; City; State; Zip Code

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

ASSETS VALUED AT $500 OR MORE

CITY CLERK DEPT.

05 MAY 27 PM 1:22

SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule M:

2 FILER NAME: Odell S Holmes JR

3 ACCOUNT # (Ethics Commission filers)

4 Description of Asset

Description of Asset

Description of Asset

Description of Asset

None

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Stanley Jobe	P.O. Box 3318	El Paso, Texas 79923	Sent $50.00
Neill & Strelitz, P. C.	501 Executive Center Blvd., Ste. 100	El Paso, Texas 79902	Sent $400.00
Peter Fraire, Jr.	5449 Soledad Ln.	El Paso, Texas 79932	Sent $75.00
Bill & Chana Burton	720 Waltham	El Paso, Texas 79922	Sent $225.00
Redd Leverton	208 Country Club rd.	El Paso, Texas 79932	Sent $250.00
Stephen Tatem	824 Twin Hills Dr.	El Paso, Texas 79912	Sent $100.00
William Hardie	221 N Kansas Suite 1100	El Paso, Texas 79901	Sent $100.00
Bill Steinmann	4717 Maxwell Ave.	El Paso, Texas 79904	Sent $100.00
Jim Curtis	1314 Cincinnati Ave.	El Paso, Texas 79902	Sent $100.00
J.P. & Assoc.	Silver Springs Dr.	El Paso, Texas 79912	Sent $400.00
Dennis Richard	609 Montana	El Paso, Texas 79902	Sent $300.00
Jim Darnell	310 N. Mesa Ste.212	El Paso, Texas 79901	Sent $100.00
Harrel & Sheila Davis	606 Coeur Dalene	El Paso, Texas 79922	Sent $250.00
Juan & Susana Herrera	484 Timber Oaks	El Paso, Texas 79932	Sent $50.00
Scott Pac	1100 Chase Tower	El Paso, Texas 79901	Sent $250.00
Herb Marsh	5847 Mira Serena	El Paso, Texas 79912	Sent $100.00
Mike & Lorena Hutson	1020 Madaline	El Paso, Texas 79902	Sent $100.00
Gail Stone	5708 Bonneville Ln.	El Paso, Texas 79912	Sent $100.00
David & Jo Ann Hendrix	5429 La Estancia	El Paso, Texas 79932	Sent $100.00
Robert Tinnell	1108 N. Campbell	El Paso, Texas 79902	Sent $100.00
Sam Sipes	609 Laurel	El Paso Texas 79903	Sent $200.00
Carl & Linda Atteberry	4605 Blossom	El Paso, Texas 79924	Sent $100.00
Mounce Green Myers Safi & Galatzan	P.O. Box 1977	El Paso, Texas 79950	Sent $100.00
Armando Peralta	2301 Montana Ave.	El Paso, Texas 79902	Sent $100.00
Stephen & Connie Gardner	81 Northwind	El Paso, Texas 79912	Sent $100.00
Jay Reyes	1122 Montana Suite 200	El Paso, Texas 79902	Sent $500.00
Larry Schwartz	609 Laurel St.	El Paso, Texas 79903	Sent $200.00

CITY CLERK DEPT.
05 MAY 27 PM 1:22