Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 -8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/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 31 PM 2:10

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME — MS / MRS / MR FIRST MI: JEROME L TILGHMAN — NICKNAME LAST SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS — ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 4504 RL SHOEMAKER EL PASO, 24

☐ Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE — AREA CODE PHONE NUMBER EXTENSION: (915) 751-4002

6 CAMPAIGN TREASURER NAME — MS / MRS / MR FIRST MI: DERRICK WILCOX — NICKNAME LAST SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business) — STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 7635 ATICHELLE WAY MESQUITE, TEXAS

8 CAMPAIGN TREASURER PHONE — AREA CODE PHONE NUMBER EXTENSION: (915) 751-4002

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 / 8 / 05 THROUGH Month Day Year: 5 / 18 / 05

11 ELECTION — ELECTION DATE Month Day Year: 6 / 4 / 05 — ELECTION TYPE: ☐ Primary ☑ Runoff ☐ General ☐ Special

12 OFFICE — OFFICE HELD (If any)

13 OFFICE SOUGHT (If known): DISTRICT 4 CITY - COUNCIL

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• Direct campaign expenditures are campaign expenditures made by others without the cand
Candidates are required to disclose this information only if they receive notification of the direc

Name

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

☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

15 C/OH NAME

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

CITY CLERK DEPT
05 MAY 31 PM 2:10

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 75
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 6175
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. TOTAL POLITICAL EXPENDITURES	$ 3779
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 2396
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ —

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
L.M. ENRIQUEZ
NOTARY PUBLIC
STATE OF TEXAS
My Comm. Exp. 06-18-08

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 of Candidate or Officeholder

Sworn to and subscribed before me, by the said _____, this the 31st day of May, 2005, to certify which, witness my hand and seal of office.

L. M. ENRIQUEZ

Printed name of officer administering oath

Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 2

2 FILER NAME: ILGHMAN, JEROME

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT. 05 MAY 31 PM 2:10

4	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5.19.05	GERALD RUBIN · STANLEE RUBIN 6 Contributor address; City; State; Zip Code 801 RIVER OAKS '12	2500	

9 Principal occupation / Job title (See Instructions): RETIRED

10 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
5.1.05	RUFUS OWENS Contributor address; City; State; Zip Code 4416 MARCUS URIBE EPTX 24	25.	

Principal occupation / Job title (See Instructions): RETIRED

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
5.15.05	LARRY FRANCIS / MARILYN FRAN Contributor address; City; State; 817 WINGFOOTE '12	200..	

Principal occupation / Job title (See Instructions): ~~BUILDER~~ RETIRED

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
4.23.05	ALEX COX - JOHNNA NICHOLS Contributor address; City; State; Zip Code 1458 UMBRIA DR EPTX '22	100..	

Principal occupation / Job title (See Instructions): RETIRED

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of contribution ($)	In-kind contribution description (if applicable)
5.18.05	RICHARD DIAZ - DBA ENERGY MATTERS Contributor address; City; State; Zip Code 3612 AMBER '04	25..	

Principal occupation / Job title (See Instructions): CONSULTANT

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 2

CITY CLERK DEPT. 05 MAY 3 PM 2:10

2 FILER NAME: ILGHMAN, JEROME

3 ACCOUNT # (Ethics Commission filers)

4	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)
30 APR 05	GARVENE PHILLIPS 29208 STONE EDGE EPTX 84	50.00	

9 Principal occupation / Job title (See Instructions): RETIRED

10 Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
05-05	W.L. OR GAYLE G. HUNT BOX 12220 EPTX 24	500	

Principal occupation / Job title (See Instructions): RETIRED BUILDER

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#:)) / Contributor address; City; State;	Amount of contribution ($)	In-kind contribution description (if applicable)
05-05	LINEBARGER-GOGGAN-BLAIR BOX 17428	500.00	

Principal occupation / Job title (See Instructions): BUILDER

Employer (See Instructions): LLP

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)
05-05	DELGADO, ACOSTA, BRADEN, JONES 221 N. KANSAS EPTX 22	250.00	

Principal occupation / Job title (See Instructions): RETIRED

Employer (See Instructions): LLP

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)
05-05	CARLOS BOMBACH / LISA BOMBACH 481 SUN POINT LN EPTX 12	600.00	

Principal occupation / Job title (See Instructions): EMPLOYED

Employer (See Instructions):

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SEE SCH F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2 FILER NAME: TILGHMAN, JEROME

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT. 05 MAY 31 PM 2:10

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)	Purpose of expenditure (See instructions regarding type of information required.)	Reimbursement from political contributions intended
4 5.05	5 OFFICE DEPOT 6 BASSETT CENTER	8 $200	7 COPIES	☐
5.05	KROD RADIO MESA @ EXECUTIVE	289.	RADIO COMMERCIAL	☐
5/05	BEACON NEWSPAPER CHAPPARRAL, NM	290	ADS	☐
	MURPHY & TURNER & ASSOCIATES 816 CONGRESS AVE - STE 1160 AUSTIN 78701	3000.00		☐
				☐

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Printed on recycled paper

Revised 11/05/2003

IN-KIND CONTRIBUTIONS

05-05 DELGADO, ACOSTA BRANDEN JONES 1500.
221 N KANSAS STE 2000 EPTC '01

MAILING SERVICES

CITY CLERK DEPT.
05 MAY 31 PM 2:10