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

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): 00000000

2 Total pages this report: 1/30

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

CITY CLERK DEPT. 05 JAN 14 PM 4:48

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr. FIRST: Joseph D. MI:

NICKNAME: LAST: Wardy SUFFIX: Jr.

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

5601 Cortina

El Paso TX 79912

5 CAMPAIGN TREASURER NAME

TITLE: Mr. FIRST: Rene MI:

NICKNAME: LAST: Pena SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

4171 N. Mesa
Suite B-100
El Paso TX 79902

7 CAMPAIGN TREASURER PHONE

AREA CODE: (915) PHONE NUMBER: 542-1733 EXTENSION:

8 REPORT TYPE

- [X] 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)

9 PERIOD COVERED

Month Day Year: 07/01/2004 THROUGH Month Day Year: 12/31/2004

10 ELECTION

ELECTION DATE Month Day Year: 05/07/2005

ELECTION TYPE: ☐ Primary ☐ Runoff [X] General ☐ Special

11 OFFICE

OFFICE HELD (if any): Other – Mayor / El Paso,TX

12 OFFICE SOUGHT (if known): Other – Mayor / El Paso,TX

13 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

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME: JOSEPH D. WARDY, 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

CITY CLERK DEPT. 05 JAN 14 PM 4:48

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ -0-
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 41,157.96
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ -0-
	4. **TOTAL POLITICAL EXPENDITURES**	$ 2,593.19
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$150,780.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

19 AFFIDAVIT

DORA NAZARIEGA
NOTARY PUBLIC
In and for the State of Texas
My commission expires
10-13-2008

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.

Joseph D. Wardy Jr.
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Joseph D. Wardy, Jr., this the 14th day of January, 20 05, to certify which, witness my hand and seal of office.

Dora Nazariega — Signature of officer administering oath
Dora Nazariega — Printed name of officer administering oath
Notary — Title of officer administering oath

Printed on recycled paper

Revised 11/05/2003

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
07/22/2004	Mr. Jon F. Abrams 111 Congress Suite 2400 Austin TX 78701	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/04/2004	Mr. Gary R. Ackers 113 Crescent Court Spicewood TX 78669	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/22/2004	Mr. Gregory K. Allen 12241 Roberta Lynne Dr. El Paso TX 79936	150.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Patrick Attel 289 Puesta Del Sol Ln. El Paso TX 79912	200.00	
Principal occupation (Optional)		Employer (Optional)	
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)
08/24/2004	Mr. Andrew Avila 6365 Los Robles Dr. El Paso TX 79912	300.00	
Principal occupation (Optional)		Employer (Optional)	

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
07/22/2004	Mr. Daniel Avila 3713 San Mateo El Paso TX 79902	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	

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)
11/18/2004	Mr. Jorge L. Azcarate 417 Irondale I El Paso TX 79912	750.00	
Principal occupation (Optional)		Employer (Optional)	

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)
10/04/2004	Mr. Mark Bernat 4695 N. Mesa St. El Paso TX 79912	200.00	
Principal occupation (Optional)		Employer (Optional)	

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)
11/18/2004	Mr. Joseph H. Bilbe 5394 Cory Dr. El Paso TX 79932	400.00	
Principal occupation (Optional)		Employer (Optional)	

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)
11/18/2004	Ms. Loretta Blankenship 9389 Viscount #4-A El Paso TX 79925	250.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 5/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
07/02/2004	Mrs. Betty D. Boggs 6032 Camino Alegre El Paso TX 79912	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
11/18/2004	Mr. Bob Bowling P. O. Box 4136 El Paso TX 79914	1000.00	

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mr. Gregory B. Bowling 7484 Plaza Redonda El Paso TX 79912	1000.00	

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mrs. Paulette Bowling 6317 Casper Ridge El Paso TX 79912	2402.50	Food and drinks for Fu - ndraiser Reception

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mr. Randall Bowling 6453 Calle Vista Dr. El Paso TX 79912	1000.00	

Principal occupation (Optional)
Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 6/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
11/18/2004	Mr. Robert Bowling 6705 Pearl Ridge El Paso TX 79912	1000.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/22/2004	Mr. Chris Bradley 310 N. Mesa Suit 500 El Paso TX 79901	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/22/2004	Mr. James Branson 5100 Yucca Pl. El Paso TX 79932	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2004	Mr. Doug L. Brewer 6324 Franklin Bluff El Paso TX 79912	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/22/2004	Mr. Irvin J. Brown 200 Bartlet Suite 105 El Paso TX 79912	500.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
09/27/2004	Mr. Thomas E. Casaday 5659 Star View Dr. El Paso TX 79912	350.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
11/18/2004	Mr. Jesus J. Castillo 6401 Upper Valley Rd. El Paso TX 79932	300.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/22/2004	Dr. Charles P. Cavaretta 729 Twin Hills El Paso TX 79912	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mr. John Chaney 223 Rio St. Ruidoso NM 88345	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/22/2004	Mr. Jack T. Chapman 221 N. Kansas Suite 1910 El Paso TX 79901	500.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 8/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/09/2004	Mr. Roy T. Chapman 1711 N. Kansas El Paso TX 79901	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
07/22/2004	Mr. Terry J. Chaumont 11660 Montwood Dr. Suite 1 El Paso TX 79936	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Ms. Irene Chavez 1340 Loma Verde Dr. El Paso TX 79936	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/16/2004	Ms. Laura Cortez 1512 Raynolds El Paso TX 79903	200.00	
Principal occupation (Optional)		Employer (Optional)	
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)
07/22/2004	Mr. Louie Cortinas 1662 Janet Coles El Paso TX 79936	200.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 9/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
09/27/2004	Dr. Walter C. Daniell 407 Crown Point Dr. El Paso TX 79912	350.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/22/2004	El Paso Police Officer's Association PAC 747 E. San Antonio Suite 103 El Paso TX 79901	5000.00	

Principal occupation (Optional)
Employer (Optional)

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)
07/22/2004	El Paso Police Officer's Association PAC 747 E. San Antonio Suite 103 El Paso TX 79901	375.09	Bar for 7/22/04 Fundrai - ser - paid to Camino R - eal Hotel

Principal occupation (Optional)
Employer (Optional)

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)
07/22/2004	El Paso Police Officer's Association PAC 747 E. San Antonio Suite 103 El Paso TX 79901	476.69	Invitations & postage for 7/22/04 Fundraiser

Principal occupation (Optional)
Employer (Optional)

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)
07/22/2004	El Paso Police Officer's Association PAC 747 E. San Antonio Suite 103 El Paso TX 79901	1052.45	Food for 7/22/04 Fundra - iser - paid to Camino R - eal Hotel

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 10/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission Use) 00000000

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)
07/22/2004	Ms. Jan Engels 2219 King James Pl. El Paso TX 79903	25.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
07/22/2004	Mr. Mark Fenenbock P. O. Box 220330 El Paso TX 79913	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2004	Mr. L. Frederick Francis P. O. Box 3739 El Paso TX 79923	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
10/04/2004	Ms. Sydney Leeds Goltz 1204 Cerrito Alegre El Paso TX 79912	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2004	Dr. Adrian L. Grass 1152 Regal Ridge El Paso TX 79912	200.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 11/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/27/2004	Dr. Gerardo Gregory-Quinones 909 La Cabana El Paso TX 79912	50.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Bruce Gulbas 5006 Montoya El Paso TX 79922	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Dr. Paul S. Gulbas 4829 Olmos El Paso TX 79922	200.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. Norman G. Haddad 3800 N. Mesa,#D-2 El Paso TX 79902	500.00	
Principal occupation (Optional)	Employer (Optional)		
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)
11/18/2004	Mr. Bryan H. Hall 725 Rio Valle Ct. El Paso TX 79932	250.00	
Principal occupation (Optional)	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 12/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/18/2004	Mr. Peter C. Harmonson III 6320 N. Mesa St. El Paso TX 79912	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Dr. William D. Harper 5026 Montana Ave. El Paso TX 79903	350.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. Dennis D. Healy 6120-D Los Robles Dr. El Paso TX 79912	500.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Mr. Robert C. Heasley 4130 Rio Bravo Suite A-100 El Paso TX 79902	350.00	
Principal occupation (Optional)	Employer (Optional)		
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)
07/24/2004	Mr. Robert H. Hoy Jr. 1122 Airway Blvd. El Paso TX 79925	500.00	
Principal occupation (Optional)	Employer (Optional)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 13/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/17/2004	JOBE - PAC #1 McKelligon Canyon Rd. El Paso TX 79930	1000.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. Chris Johnstone 38 Goodwin El Paso TX 79902	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
10/13/2004	Mr. Duane O. Juvrud 300 E. Main Suite 1112 El Paso TX 79901	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. David B. Karam 4025 Roadside Ct. El Paso TX 79922	500.00	
Principal occupation (Optional)		Employer (Optional)	
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)
09/22/2004	Mr. John C. Karlsruher 717 Dulce Tierra El Paso TX 79912	250.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 14/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
11/18/2004	Mr. Terrel R. Karstendiek 11534 Laura Marie Dr. El Paso TX 79936	250.00	
9 Principal occupation (Optional)	10 Employer (Optional)		

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)
10/28/2004	Mr. Javier Lozano 1412 Lost Padre Mine El Paso TX 79902	350.00	
Principal occupation (Optional)	Employer (Optional)		

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)
09/22/2004	Mr. James Arthur Lyle 720 Arizona El Paso TX 79902	500.00	
Principal occupation (Optional)	Employer (Optional)		

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)
12/28/2004	Mr. Suleiman Masoud P. O. Box 220251 El Paso TX 79913	400.00	
Principal occupation (Optional)	Employer (Optional)		

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)
11/18/2004	Ms. Denise M. May 1420 Cloud Ridge Dr. El Paso TX 79912	1000.00	
Principal occupation (Optional)	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 15/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
10/04/2004	Mr. Ellis O. Mayfield 5016 Montoya El Paso TX 79922	250.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
12/28/2004	Mr. Michael P. McNamee 217 Oleander Way El Paso TX 79922	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mr. R. Bruce Meyer 813 Forest Willow El Paso TX 79922	250.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/27/2004	Dr. Carlos Miranda 5849 Diamond Point Cr. El Paso TX 79912	100.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/01/2004	Mr. Irvin Nadler 304 S. Stanton El Paso TX 79901	100.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 16/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/22/2004	Mr. Dennis R. Neesen 5625 S. Desert El Paso TX 79932	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Thomas M. Niland 5060 Yucca Pl. El Paso TX 79932	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Dan O'Leary P. O. Box 221467 El Paso TX 79913	1000.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Randal O'Leary 10657 Vista Del Sol Suite B El Paso TX 79935	500.00	
Principal occupation (Optional)		Employer (Optional)	
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)
11/18/2004	Mr. Martin Paredes P. O. Box 12403 El Paso TX 79913	100.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 17/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
12/11/2004	Mr. Refugio Partida 3301 Nashville Ave. El Paso TX 79930	500.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. Ronald M. Paschich 661 Rosinante El Paso TX 79922	500.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Mr. Jack L. Peterson 508 Autumn Willow Way El Paso TX 79922	50.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/22/2004	Mr. Jim Phillips 900 Thunderbird El Paso TX 79912	500.00	
Principal occupation (Optional)		Employer (Optional)	
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)
09/27/2004	Mr. Raul M. Portillo 825 Rosinante El Paso TX 79922	350.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 18/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
10/13/2004	Mr. Ted C. Prewitt 2303 Colleen Court Carrollton TX 75007	300.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
11/18/2004	Mr. Lee Robertson 608 Meadow Willow El Paso TX 79922	250.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
12/10/2004	Ms. Sylvia M. Robinson 3008 Roy Place El Paso TX 79936	100.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Mr. James E. Rogers Jr. 2505 Missouri El Paso TX 79903	350.00	
Principal occupation (Optional)		Employer (Optional)	
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)
09/22/2004	Mr. Ernest A. Romero P. O. Box 2832 Santa Fe NM 87504	1000.00	
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 19/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
07/22/2004	Mrs. Yvonne Isela Santoscoy 200 N. Oregon El Paso TX 79901	100.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
10/04/2004	Mr. I. T. Schwartz 430 Camino Real El Paso TX 79922	350.00	

Principal occupation (Optional)	Employer (Optional)

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)
11/05/2004	Mr. Thad Steele Jr. 1004 Star Ridge Pl. El Paso TX 79912	1000.00	

Principal occupation (Optional)	Employer (Optional)

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)
09/27/2004	Mr. Marc C. Thomasson 6016 Los Pueblos El Paso TX 79912	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
11/18/2004	Mr. Octavio Torres 7226 Oval Rock El Paso TX 79912	35.00	

Principal occupation (Optional)	Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 20/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
09/27/2004	Mr. David Urquhart 736 Somerset Dr. El Paso TX 79912	50.00	
9 Principal occupation (Optional)		10 Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Ms. Monica Vargas 4017 Flamingo El Paso TX 79902	50.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Mr. Genaro Vasquez 1409 Lost Padre Mine El Paso TX 79902	350.00	
Principal occupation (Optional)		Employer (Optional)	
Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
09/27/2004	Mr. Zachary T. Waters 203 Evesham Dr. Summerville SC 29485	50.00	
Principal occupation (Optional)		Employer (Optional)	
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)
09/22/2004	Mr. Michael N. Wieland 2211 E. Missouri Suite N-200 El Paso TX 79903	270.62	Food & bar for 9/22/04 - Fundraiser Reception
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 21/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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)
09/22/2004	Mr. Michael N. Wieland 2211 E. Missouri Suite N-200 El Paso TX 79903	500.00	

9 Principal occupation (Optional)
10 Employer (Optional)

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)
09/22/2004	Mr. Patrick B. Wieland 2211 E. Missouri Suite N-200 El Paso TX 79903	500.00	

Principal occupation (Optional)
Employer (Optional)

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)
09/22/2004	Mr. Patrick B. Wieland 2211 E. Missouri Suite N-200 El Paso TX 79903	270.61	Food and bar for 9/22/04 Fundraiser

Principal occupation (Optional)
Employer (Optional)

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)
07/22/2004	Ms. Laura L. Winter 316 Kingswood Dr. El Paso TX 79932	50.00	

Principal occupation (Optional)
Employer (Optional)

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)
11/18/2004	Mr. Stephen Yegge 6357 Casper Ridge El Paso TX 79912	500.00	

Principal occupation (Optional)
Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 22/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
11/18/2004	Mr. Thomas P. Yegge 6 Contributor address; City; State; Zip Code P. O. Box 961508 El Paso TX 79936	500.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 23/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/10/2004	Dorsey's Hallmark Cards 6101 Dew Dr. El Paso TX 79912	33.56

8 Purpose of expenditure (See instructions regarding type of information required.)
Purchase Thank You cards

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 ($)
09/15/2004	Charlotte Johnson 6100 Via Aventura El Paso TX 79912	33.99

Purpose of expenditure (See instructions regarding type of information required.)
Reimburse for office supplies

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 ($)
08/16/2004	Kwik Kopy 4310 Montana El Paso TX 79903	352.90

Purpose of expenditure (See instructions regarding type of information required.)
Thank You Cards

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 ($)
07/18/2004	SBC P. O. Box 4844 Houston TX 77097	81.39

Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 24/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/22/2004	SBC P. O. Box 4844 Houston TX 77097	20.27

8 Purpose of expenditure (See instructions regarding type of information required.)
FAX Service

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 ($)
08/13/2004	SBC P. O. Box 4844 Houston TX 77097	82.84

Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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 ($)
08/27/2004	SBC P. O. Box 4844 Houston TX 77097	21.50

Purpose of expenditure (See instructions regarding type of information required.)
FAX Service

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 ($)
09/15/2004	SBC P. O. Box 4844 Houston TX 77097	82.31

Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 25/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
09/21/2004	SBC P. O. Box 4844 Houston TX 77097	21.71

8 Purpose of expenditure (See instructions regarding type of information required.)
FAX Service

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 ($)
09/21/2004	SBC P. O. Box 4844 Houston TX 77097	0.50

Purpose of expenditure (See instructions regarding type of information required.)
Long Distance Service

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 ($)
10/19/2004	SBC P. O. Box 4844 Houston TX 77097	81.53

Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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 ($)
10/22/2004	SBC P. O. Box 4844 Houston TX 77097	21.24

Purpose of expenditure (See instructions regarding type of information required.)
FAX Service

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 26/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
11/17/2004	SBC P. O. Box 4844 Houston TX 77097	81.57

8 Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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 ($)
11/23/2004	SBC P. O. Box 4844 Houston TX 77097	21.36

Purpose of expenditure (See instructions regarding type of information required.)
FAX Service

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 ($)
12/17/2004	SBC P. O. Box 4844 Houston TX 77097	81.57

Purpose of expenditure (See instructions regarding type of information required.)
Phone Service

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 ($)
12/28/2004	SBC P. O. Box 4844 Houston TX 77097	21.36

Purpose of expenditure (See instructions regarding type of information required.)
FAX service

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 27/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
12/23/2004	Sam's Club 7970 N. Mesa El Paso TX 79912	78.18

8 Purpose of expenditure (See instructions regarding type of information required.)
Office Supplies

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 ($)
10/14/2004	Tejano Democrats P. O. Box 23031 El Paso TX 79923	30.00

Purpose of expenditure (See instructions regarding type of information required.)
Membership Dues

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 ($)
09/27/2004	Texas Ethics Commission P. O. Box 12070 Austin TX 78711-2070	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Order and Agreement Resolution - SC-240460

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 ($)
08/13/2004	U. S. Postmaster 7383 Remcon Cr. El Paso TX 79912	37.00

Purpose of expenditure (See instructions regarding type of information required.)
postage stamps

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

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 28/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
10/14/2004	U. S. Postmaster 7383 Remcon Cr. El Paso TX 79912	74.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage stamps

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 ($)
07/01/2004	United Bank P. O. Box 246 El Paso TX 79943	42.65

Purpose of expenditure (See instructions regarding type of information required.)
New Check Order

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 ($)
07/01/2004	United Bank P. O. Box 246 El Paso TX 79943	5.00

Purpose of expenditure (See instructions regarding type of information required.)
Returned check bank charge

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 ($)
07/01/2004	United Bank P. O. Box 246 El Paso TX 79943	300.00

Purpose of expenditure (See instructions regarding type of information required.)
Returned Check -NSF - Duane Aboud donation

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

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 29/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
07/08/2004	Mr. Joseph D. Wardy Jr. 5601 Cortina El Paso TX 79912	393.38

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for July 4th Volunteer Appreciation - BBQ supplies

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 ($)
11/17/2004	YAW 9928 Bomarc El Paso TX 79924	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Donation to support Youth Appreciation Week Banquet

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

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 30/30

2 FILER NAME
Mr. Joseph D. Wardy Jr.

3 ACCOUNT # (Ethics Commission filers)
00000000

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 ($)	Reimbursement from political contributions intended
07/01/2004	Albertsons Savon #932 7022 N. Mesa El Paso TX 79912	July 4th Volunteer Appreciation BBQ	37.67	[X]
07/02/2004	Cowtown Discount Liquor 6404 N. Mesa El Paso TX 79912	July 4th Volunteer Appreciation BBQ	43.70	[X]
07/02/2004	Cowtown Discount Liquor 6404 N. Mesa El Paso TX 79912	July 4th Volunteer Appreciation BBQ	19.03	[X]
07/01/2004	Sam's Club 7970 N. Mesa El Paso TX 79912	July 4th Volunteer Appreciation BBQ	245.70	[X]
07/02/2004	Sam's Club 7970 N. Mesa El Paso TX 79912	July 4th Volunteer Appreciation BBQ	47.28	[X]