

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Haddad, Leo Gus (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00000001

16 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. ..

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

additional pages

CITY CLERK DEPT.
09 JUL 15 PM 6:15

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 16,660.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 22,024.44

CONTRIBUTION BALANCE

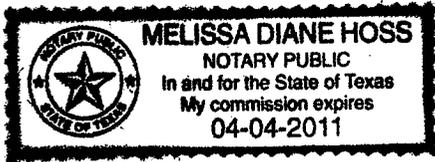
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 4,765.36

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

18 AFFIDAVIT

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



[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Melissa Diane Hoss, this the 15 day of July, 20 09, 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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
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CITY CLERK DEPT.

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 05/04/2009
5 Full name of contributor out-of-state PAC (ID# _____)
Abraham, Bryan

7 Amount of contribution (\$) \$1,000.00
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
5401 Tierra Vista Ln
El Paso, TX 79932

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Real Estate

10 Employer (See Instructions)
Self Employed

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Abraham, Harry Jr

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
114 Meander
Ruidoso, NM 88008

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Abraham, James

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
114 Meander
Ruidoso, NM 88008

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/01/2009
Full name of contributor out-of-state PAC (ID# _____)
Arroyo, Jorge

Amount of contribution (\$) \$125.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
748 Camino Norte Ct
El Paso, TX 79932

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/30/2009
Full name of contributor out-of-state PAC (ID# _____)
Ayoub, Robert S

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
624 Coeur Dalene Cir
El Paso, TX 79922

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 05/07/2009
5 Full name of contributor out-of-state PAC (ID# _____)
Bohannon, Thomas T Jr

7 Amount of contribution (\$) \$1,000.00
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
5525 N Stanton
El Paso, TX 79912

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Executive

10 Employer (See Instructions)
Bohannon Development

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Burt, R C

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
PO Box 1803
Santa Teresa, NM 88008

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 04/30/2009
Full name of contributor out-of-state PAC (ID# _____)
Collins, Timothy R

Amount of contribution (\$) \$200.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1621 Rim Rd
El Paso, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Davila, Lilly

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
281 E Borderland Rd
El Paso, TX 79932

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Daw, Rosalie

Amount of contribution (\$) \$500.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
536 Canyon Springs Dr
El Paso, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Best Efforts

Employer (See Instructions)
Best Efforts

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/9 Report: 5/16

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 5 Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Dipp, Paul

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
1000 E Overland
El Paso, TX 79901

\$500.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Executive

10 Employer (See Instructions)
Economy Cash & Carry

Date Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Ekery, H

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4228 Ridge Crest
El Paso, TX 79902

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
06/03/2009 Esper, Ward M

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
248 Viking Dr
El Paso, TX 79912

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Foster, Robert F

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1790 N Lee Trevino
Ste 601
El Paso, TX 79936

\$2,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Executive

Employer (See Instructions)
Southwest Land Development Services

Date Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Franco, Arturo

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1631 Henri Dunant
El Paso, TX 79936

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2009-15
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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/9 Report: 6/16	
2 FILER NAME Haddad, Leo Gus (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haddad, Margaret 6 Contributor address; City; State; Zip Code 6408 Dawn Dr El Paso, TX 79912	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haydar, Zafer MD Contributor address; City; State; Zip Code 6065 Montana Ave Ste A-2 El Paso, TX 79925	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physician		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self Employed			
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Hector Contributor address; City; State; Zip Code 12629 Tierra Fresa El Paso, TX 79938	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huit, Lorraine Contributor address; City; State; Zip Code 6124 La Posta El Paso, TX 79912	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hutchinson, C H Contributor address; City; State; Zip Code 5019 Montoya Dr El Paso, TX 79922	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
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2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Isaac, William L

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
5840 Kingsfield
El Paso, TX 79912

\$500.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Best Efforts

10 Employer (See Instructions)
Best Efforts

Date Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Joseph, Harvey D

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4579 Brighton Ln
El Paso, TX 79902

\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/05/2009 Kayrouz, Victor K Msgr

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
900 W Missouri Ave
El Paso, TX 79902

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Malooy, Robert

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4030 Montana Ave
El Paso, TX 79902

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
04/30/2009 Marcus, Meyer

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6500 Montana Ave
El Paso, TX 79925

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

CITY CLERK DEPT.
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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/9 Report: 8/16	
2 FILER NAME Haddad, Leo Gus (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Leslie N 6 Contributor address; City; State; Zip Code 4336 Donnybrook Pl El Paso, TX 79902	7 Amount of contribution (\$) \$400.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nabhan, Albert Contributor address; City; State; Zip Code 1590 Lomaland Ste F El Paso, TX 79935	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Odom, Jerry L Contributor address; City; State; Zip Code 7100 W Westwind Ste 230 El Paso, TX 79915	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert C & Dell M Elias Trust Contributor address; City; State; Zip Code PO Box 6174 Incline Village, NV 89450	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) N/A	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Marissa Garland Contributor address; City; State; Zip Code 701 Rim Rd El Paso, TX 79902	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/9 Report: 9/16	
2 FILER NAME Haddad, Leo Gus (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saab, Richard L 6 Contributor address; City; State; Zip Code 5713 Pebble Beach Dr El Paso, TX 79912	7 Amount of contribution (\$) \$165.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saab, Robert A Contributor address; City; State; Zip Code 707 Myrtle Ave El Paso, TX 79901	Amount of contribution (\$) \$165.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saab, William C Contributor address; City; State; Zip Code 700 Camino Real El Paso, TX 79922	Amount of contribution (\$) \$165.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Safi, S A Contributor address; City; State; Zip Code 755 Fairway Cir El Paso, TX 79922	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmid, John A Contributor address; City; State; Zip Code 7608 Dianjou Dr El Paso, TX 79912	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/9 Report: 10/16	
2 FILER NAME Haddad, Leo Gus (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schwartz, Douglas A 6 Contributor address; City; State; Zip Code PO Box 13611 El Paso, TX 79913	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable) CITY CLERK DEPT. 6:17
9 Principal occupation / Job title (See Instructions) Developer		10 Employer (See Instructions) Southwest Land Development Services	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Clyde E Contributor address; City; State; Zip Code 100 Calle Colina El Paso, TX 79912	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) SBP Properties	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seifts, Rena K Contributor address; City; State; Zip Code 1092 Dona Beatrice El Paso, TX 79932	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sifuentes, Miguel Contributor address; City; State; Zip Code 1601 Dakota St El Paso, TX 79930	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sorenson, Tina Contributor address; City; State; Zip Code 1672 Billy Casper El Paso, TX 79933	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
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2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 05/14/2009
5 Full name of contributor out-of-state PAC (ID# _____)
Wilbanks, John D

7 Amount of contribution (\$) \$25.00
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
921 Thunderbird
El Paso, TX 79912

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 05/04/2009
Full name of contributor out-of-state PAC (ID# _____)
Williams, Ray W

Amount of contribution (\$) \$200.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1067 Los Jardines Cir
El Paso, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

CITY CLERK DEPT.
09 JUL 15 PM 6:17

POLITICAL EXPENDITURES

SCHEDULE F

09 JUL 5 01 5:17

CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/3 Report: 12/16

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 04/30/2009	5 Payee name David's Pennants, Banners & Graphics 6 Payee address; City; State; Zip Code 9911 Carnegie El Paso, TX 79925	7 Amount (\$) \$1,955.27
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8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 05/08/2009	Payee name El Diario Newspaper Payee address; City; State; Zip Code 1801 Texas Ave El Paso, TX 79901	Amount (\$) \$1,344.00
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Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 04/30/2009	Payee name Haddad, Gus Payee address; City; State; Zip Code PO Box 1739 El Paso, TX 79949	Amount (\$) \$547.40
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Purpose of payment (See instructions regarding type of information required.) Reimbursement - Personal advances (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 05/08/2009	Payee name Haddad, Gus Payee address; City; State; Zip Code PO Box 1739 El Paso, TX 79949	Amount (\$) \$1,850.00
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Purpose of payment (See instructions regarding type of information required.) Reimbursement - Personal advances (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

CITY CLERK DEPT.
00 JUL 15 PM 6:11

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 13/16
2 FILER NAME Haddad, Leo Gus (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 06/10/2009	5 Payee name Inkspress Urself 6 Payee address; City; State; Zip Code 6011 Torrey Pines Drive El Paso, TX 79912	7 Amount (\$) \$1,928.80
8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/30/2009	Payee name Oscar Ornelas Jr CPA Payee address; City; State; Zip Code 1111 Montana Ave El Paso, TX 79902	Amount (\$) \$332.00
Purpose of payment (See instructions regarding type of information required.) Treasury services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/08/2009	Payee name Oscar Ornelas Jr CPA Payee address; City; State; Zip Code 1111 Montana Ave El Paso, TX 79902	Amount (\$) \$573.61
Purpose of payment (See instructions regarding type of information required.) Treasury services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/30/2009	Payee name The Forma Group Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	Amount (\$) \$5,000.00
Purpose of payment (See instructions regarding type of information required.) Consulting services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/3 Report: 14/16

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name The Forma Group	7 Amount (\$)
05/01/2009	6 Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$1,400.00

8 Purpose of payment (See instructions regarding type of information required.) Election day services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name The Forma Group	Amount (\$)
05/08/2009	Payee address; City; State; Zip Code 1 Union Fashion Center Ste B201 El Paso, TX 79901	\$5,000.00

Purpose of payment (See instructions regarding type of information required.) Consulting services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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CITY CLERK DEPT.
09 JUL 15 PM 6:17

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

CITY CLERK DEPT
09 JUL 14 PM 5:18

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 15/16

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	8 Amount (\$)
05/09/2009	Almada, Francisco <hr/> 6 Payee address; City; State; Zip Code 424 Executive Center Ste 100 El Paso, TX 79902 7 Purpose of expenditure (See instructions regarding type of information required.) Security - election day rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/08/2009	Payee name Big Lots <hr/> Payee address; City; State; Zip Code 7025 N Mesa El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Supplies - election day rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$55.30 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/08/2009	Payee name Casa Rentals <hr/> Payee address; City; State; Zip Code 1840 N Lee Trevino No 301 El Paso, TX 79936 Purpose of expenditure (See instructions regarding type of information required.) Rent - election day rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$142.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/05/2009	Payee name Chavira, Refugio <hr/> Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915 Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/11/2009	Payee name Chavira, Refugio <hr/> Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915 Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

SYSTEMS
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The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 16/16

2 FILER NAME Haddad, Leo Gus (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	8 Amount (\$)
05/18/2009	Chavira, Refugio ----- 6 Payee address; City; State; Zip Code 7915 Meraz Apt 62 El Paso, TX 79915 7 Purpose of expenditure (See instructions regarding type of information required.) Contract labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/06/2009	Payee name Chevron ----- Payee address; City; State; Zip Code 2100 Yarbrough El Paso, TX 79925 Purpose of expenditure (See instructions regarding type of information required.) Fuel (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$55.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/27/2009	Payee name Dependable Electric ----- Payee address; City; State; Zip Code 8601 Polaris El Paso, TX 79904 Purpose of expenditure (See instructions regarding type of information required.) Electrical work for election rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$730.19 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/09/2009	Payee name Guerra, Javier ----- Payee address; City; State; Zip Code 424 Executive Center Ste 100 El Paso, TX 79902 Purpose of expenditure (See instructions regarding type of information required.) Security - election day rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
05/08/2009	Payee name Walmart ----- Payee address; City; State; Zip Code 7555 N. Mesa El Paso, TX 79912 Purpose of expenditure (See instructions regarding type of information required.) Supplies - election day rally (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$10.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended