

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <i>2</i>
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3 COMMITTEE NAME <i>EI PASO For Equality</i>	OFFICE USE ONLY Date Received <i>2011 MAY 15 5:07</i> CITY CLERK DEPT.
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4 COMMITTEE ADDRESS <input checked="" type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>P.O. Box 23086 EI PASO, TX 79923</i>	Date Hand-delivered or Postmarked Receipt# Amount
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5 CAMPAIGN TREASURER NAME NICKNAME	MS / MRS / MR FIRST LAST SUFFIX <i>DANIEL ROLLINGS</i>	Date Processed Date Imaged
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6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>504 Sourney Court EI PASO, TX 79912</i>
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7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> change of address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>SAME AS ABOVE</i>
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8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(915) 525-3435</i>
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9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination
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10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>04/15/11 THROUGH 05/05/11</i>
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11 ELECTION	ELECTION DATE Month Day Year <i>11 / 08 / 11</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
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GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: CLERK DEPT. FORM SPAC
PURPOSE AND TOTALS 2011 MAY -5 PM COVER SHEET PG 2

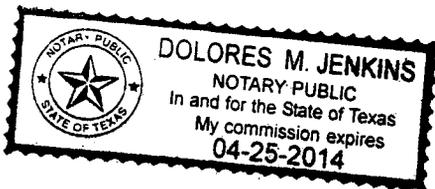
12 COMMITTEE NAME E.I. PASO For Equality ACCOUNT # (Ethics Commission Filers)

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)	<input type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME
	<input type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # ELECTION DATE Month Day Year <u>11 / 08 / 11</u>
<input type="checkbox"/> SUPPORT (Candidate or Measure)		DESCRIPTION <u>City Charter Election</u>
<input type="checkbox"/> OPPOSE (Candidate or Measure)		
<input type="checkbox"/> ASSIST (Officeholder)		

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ _____
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ _____
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ _____
	4. TOTAL POLITICAL EXPENDITURES	\$ _____
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>774.09</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ _____

15 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.



[Signature]
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Daniel Rollings, this the 5th day of May, 20 11, to certify which, witness my hand and seal of office.

Dolores M. Jenkins Signature of officer administering oath
Dolores M. Jenkins Printed name of officer administering oath
Notary Title of officer administering oath