Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

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)

2 Total pages filed: 19

OFFICE USE ONLY
Date Received
2011 MAY -5 PM 4:43 CITY CLERK DEPT.
Date Hand-delivered or Postmarked
Receipt # | Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MS. | FIRST: LYDA | MI: A
NICKNAME | LAST: NESS-GARCIA | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2801 N. FLORENCE
EL PASO TX 79902

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(915) 9201849

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MS. | FIRST: CHERYL | MI: A
NICKNAME | LAST: PRICE | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
609 MYRTLE, 102 ELPASO TX 79901

8 CAMPAIGN TREASURER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(915) 203-4605

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

10 PERIOD COVERED
Month Day Year: 04/13/2011 THROUGH Month Day Year: 04/05/2011

11 ELECTION
ELECTION DATE Month Day Year: 05/14/2011
ELECTION TYPE: ☑ Primary ☐ Runoff ☐ General ☐ Special

12 OFFICE
OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.
Name
Address / PO Box; Apt. / Suite #; City; State; Zip Code
☐ additional pages

GO TO PAGE 2

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CITY CLERK DEPT.
2011 MAY -5 PM 4:43

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 560.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 5234.03

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
4.	**TOTAL POLITICAL EXPENDITURES**	$ 6433.28

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2500 —

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
CHERYL A. PRICE
My Commission Expires
April 23, 2012

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 candidate, this the 5th day of May, 20 ____, to certify which, witness my hand and seal of office.

Cheryl A. Price	CHERYL A. PRICE	NOTARY
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 6

2 FILER NAME: LYDA A. NESS-GARCIA

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/12/11	Hollie & Gabriel Inostroza 312 Oakforest Dr Bluffington IN 46714	100-	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	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)
4/25/11	Franz Theard 1800 N. Stanton El Paso TX 79902	500-	(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/25/11	Robert Neill 501 Executive Center 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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/18/11	DLB Properties - Tim Gray Larry Bower D. Bingham 6044 Gateway East El Paso TX 79905	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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/23/11	Donald Kirkpatrick 6945 Alto Rey El Paso TX 79912	100 00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 6

2 FILER NAME: Lyda A. Ness-Garcia

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/1/11	Hilda Chavez 200 Mesa Vista Rd Anthony NM 88021	20-	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/19/11	Kimberly Smith 405 Sharondale El Paso TX 79912	250.00	(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/21/11	Jesus Herrerra 6021 Palo Alto El Paso TX 79912	200-	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/21/	Brian Temple & Jennifer Hayes 6588 Hermosa Del Sol '12 El Paso Texas	50.00	(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/21	Tara Montagnino 5705 Lawndale #B El Paso Texas 79912	40-	(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

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SCHEDULE A

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2 FILER NAME: Lyda A. Ness-Garcia

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/29	Richard Braun 5409 Rockwood Rd 79932	100-	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/1/11	Mike Llerrera 4410 Trowbridge 79903	100-	(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/1/11	Tom Wilson 357 La Mirada 79932	25.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/1/11	Kimberly Smith 405 Sharondale 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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/1/11	Anthony Pearson & Ann Pease 601 Blacker 79902	50.00	(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

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2011 MAY -5 PM 4:44

SCHEDULE A

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1 Total pages Schedule A: 6

2 FILER NAME: Lyda A. Ness-Garcia

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/15/11	Daisy Everhart 735 Espolon El Paso TX 79912	250 00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/21/11	Gerald & Stanlee Rubin 538 Laurel Canyon El Paso TX 79912	1000 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/28/11	Don Luciano 1400 Texas El Paso TX 79901	200 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/18/11	Raquel & David Bingham 6006 Balcones Ct #11 El Paso TX 79912	100 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/2/11	Lisa Gutierrez 7020 Toluca El Paso TX 79901	100 00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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CITY CLERK DEPT.
2011 MAY -5 PM 4:44

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A: 6

2 FILER NAME: Lyda A. Ness-Garcia

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
5/2/11	Patricia Palafox 766a Espada El Paso TX 79912	100.00	(If travel outside of Texas, complete Schedule T)		
5/2/11	Louis Aguilar 801 N. El Paso El Paso TX 79902	200.00	(If travel outside of Texas, complete Schedule T)		
4/18/11	4 Amigos: Gil, Chris & Trey David Bingham Malooly 6044 Gateway East El Paso TX 79905	250.00	(If travel outside of Texas, complete Schedule T)		
4/26/11	Mike Dipp 100. N. Ochoa El Paso TX 79901	26.90	Water bottles (If travel outside of Texas, complete Schedule T)		
5/2/11	Tom Stanton 521 Texas Ave El Paso TX 79901	100.00	(If travel outside of Texas, complete Schedule T)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 6

2 FILER NAME: Lyda A. Ness-Garcia

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/1/11	Mike Dipp 100 N. Ochoa El Paso TX 79901	412.13	Volunteer Party Casa Jurado

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	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)

(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	LydaANess-Garcia	

4 Date	5 Payee name
4/25/11	Charlie Garcia / A Floral Dream

6 Amount ($)	7 Payee address; City; State; Zip Code
200⁻	811 Wyoming El Paso TX 79905

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising	Sign placement

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

Date	Payee name
4/22/11	Andrew George Bradshaw

Amount ($)	Payee address; City; State; Zip Code
31⁵⁵	2801 N. Florence El Paso TX 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Reimbursement Volunteersnack

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

Date	Payee name
4/26/11	Reuel Group

Amount ($)	Payee address; City; State; Zip Code
500⁰⁰	6006 N. Mesa El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	Phonelist

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

Date	Payee name
5/2/11	Reuel Group

Amount ($)	Payee address; City; State; Zip Code
1000⁰⁰	6006 N. Mesa El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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

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POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lyda A. Ness-Garcia	

4 Date	5 Payee name
5/4	711

6 Amount ($)	7 Payee address; City; State; Zip Code
11 01	2112 N. Mesa El Paso TX 79902

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Volunteer Snack

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

Date	Payee name
4/19	DIMME

Amount ($)	Payee address; City; State; Zip Code
320 00	116 S. Piedras El Paso TX 79905

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	Signs/Banners

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

Date	Payee name
4/22/11	Charlie Garcia / A Floral Dream

Amount ($)	Payee address; City; State; Zip Code
200 00	811 Wyoming El Paso TX 79905

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	Sign Maintenance

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

Date	Payee name
4/22/11	Andrew George Bradshaw

Amount ($)	Payee address; City; State; Zip Code
56 04	2801 N. Florence El Paso TX 79901

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Reimburse Volunteer Food

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lydd A Ness-Garcia	

Expenditure 1

4 Date	5 Payee name
5/2/11	FINA 711
6 Amount ($)	**7 Payee address; City; State; Zip Code**
2.58	2112 N. MESA EL PASO TX 79902
8 PURPOSE OF EXPENDITURE	**(a) Category** (See categories listed at the top of this schedule): Food/Beverage Exp — **(b) Description** (If travel outside of Texas, complete Schedule T): Snacks Water Volunteers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Expenditure 2

Date	Payee name
5/3/11	Circle K
Amount ($)	**Payee address; City; State; Zip Code**
1.79	1400 W. Yandell El Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): FOOD/BEV EXP — **Description** (If travel outside of Texas, complete Schedule T): Snacks Water Volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Expenditure 3

Date	Payee name
5/4/11	Chevron
Amount ($)	**Payee address; City; State; Zip Code**
4.51	715 N Stanton El Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Food/Beverage Exp. — **Description** (If travel outside of Texas, complete Schedule T): Snacks Water Volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Expenditure 4

Date	Payee name
5/4/11	Circle K
Amount ($)	**Payee address; City; State; Zip Code**
3.55	1400 W. Yandell El Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Food/Beverage Exp — **Description** (If travel outside of Texas, complete Schedule T): water/drinks/snacks/volunteer
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	LYDA A NESS-GARCIA	

4 Date	5 Payee name
4/20/11	Carls Jr.
6 Amount ($)	**7 Payee address; City; State; Zip Code**
4 33	7910 Artcraft Rd El Paso TX 79932

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Food Expense	Food for Walkers

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

Date	Payee name
4/25/11	Albertsons
Amount ($)	**Payee address; City; State; Zip Code**
11 83	3100 N. Mesa El Paso TX 79932

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Volunteer snacks

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

Date	Payee name
4/27/11	Diamond Shamrock / Valero
Amount ($)	**Payee address; City; State; Zip Code**
94 72	6040 Mesa El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	Gas for volunteers

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

Date	Payee name
5/2/11	FINA 711
Amount ($)	**Payee address; City; State; Zip Code**
66 35	2112 N. MESA EL Paso TX 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	Gas for Volunteers

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

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POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lyda A. Ness-Garcia	

Entry 1

4 Date	5 Payee name
5/2/11	Geogeske
6 Amount ($)	**7 Payee address; City; State; Zip Code**
47.94	2701 N. Stanton El Paso, TX 79902
8 PURPOSE OF EXPENDITURE	**(a) Category** (See categories listed at the top of this schedule): Food/Beverage Expense — **(b) Description** (If travel outside of Texas, complete Schedule T): Volunteers Food
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Entry 2

Date	Payee name
5/2/11	Subway
Amount ($)	**Payee address; City; State; Zip Code**
34.63	2625 N. Mesa El Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Food/Beverage Exp. — **Description** (If travel outside of Texas, complete Schedule T): Volunteers Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Entry 3

Date	Payee name
5/2/11	FINA 711
Amount ($)	**Payee address; City; State; Zip Code**
23.73	2112 N. Mesa EL Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Food/Beverage Exp — **Description** (If travel outside of Texas, complete Schedule T): Volunteers/Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

Entry 4

Date	Payee name
5/2/11	Albertsons
Amount ($)	**Payee address; City; State; Zip Code**
22.29	3100 N. Mesa, El Paso TX 79902
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Food/Beverage Exp — **Description** (If travel outside of Texas, complete Schedule T): Volunteers/Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: — Office sought: — Office held:

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lyda A. Ness-Garaa	

Entry 1

4 Date	5 Payee name
5/4	Valero
6 Amount ($)	**7 Payee address; City; State; Zip Code**
40.00	3100 N. Mesa El Paso TX 79922

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Travel in District	Gas for Car

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

Entry 2

Date	Payee name
5/4	TACO Bell
Amount ($)	**Payee address; City; State; Zip Code**
9.39	2103 N. Mesa St El Paso 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Beverage	Snacks/Food/Bev Volunteer

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

Entry 3

Date	Payee name
5/4	Walgreens
Amount ($)	**Payee address; City; State; Zip Code**
4.16	2800 N. Mesa El Pas TK 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	OTHER	Tool for Sign

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

Entry 4

Date	Payee name
5/4	Walgreens
Amount ($)	**Payee address; City; State; Zip Code**
4.32	2800 N. Mesa El Paso TX 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	FOOD/BEV	Volunteer Snack

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11	2 FILER NAME: Lyda A. Ness-Garcia	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 4/19	5 Payee name: Shell OIL	
6 Amount ($): 3.00	7 Payee address; City; State; Zip Code: 7900 Artcraft, El Paso 79932	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Food/Beverage	(b) Description (If travel outside of Texas, complete Schedule T): Food/Ber. Volunteers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 4/20	Payee name: Diamond Shamrock	
Amount ($): ~~32~~ 198	Payee address; City; State; Zip Code: 4201 N. Mesa, El Paso TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food/Beverage	Description (If travel outside of Texas, complete Schedule T): Food/Beverage Volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 4/20	Payee name: Valero	
Amount ($): 32.10	Payee address; City; State; Zip Code: 3100 N. Mesa, El Paso TX 79922	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Travel in District	Description (If travel outside of Texas, complete Schedule T): Gas for Volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 4/20	Payee name: Los Gallegos	
Amount ($): 15.05	Payee address; City; State; Zip Code: 4400 N. Mesa, El Paso TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food/Beverage	Description (If travel outside of Texas, complete Schedule T): Volunteer Snacks/Food/Ber
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11	2 FILER NAME Lyda A. Ness-Garcia	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/18	5 Payee name LOWES	
6 Amount ($) 99 74/	7 Payee address; City; State; Zip Code 430 E. Redd El Paso TX 79912	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OTHER/Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Materials for Signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 4/18	Payee name LOWES	
Amount ($) 75 10/	Payee address; City; State; Zip Code 430 E. Redd El Paso TX 79912	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other/Advertising	Description (If travel outside of Texas, complete Schedule T) Materials for signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 4/18	Payee name 711	
Amount ($) 75 00	Payee address; City; State; Zip Code 5385 N. Mesa El Paso TX 79912	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel IN District	Description (If travel outside of Texas, complete Schedule T) Gas for walkers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 4/18	Payee name LOWES	
Amount ($) 66 24/	Payee address; City; State; Zip Code 430 E. Redd El Paso TX 79912	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other/Advertising	Description (If travel outside of Texas, complete Schedule T) Materials for signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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POLITICAL EXPENDITURES

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2011 MAY -5 PM 4:44

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lyda A. Ness-Garag	

4 Date	5 Payee name
4/18	BREW Restaurant

6 Amount ($)	7 Payee address; City; State; Zip Code
46 76	8041 N. Mesa, El Paso 79922

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Food/Bev Volunteer lunch

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

Date	Payee name
4/18	Lowes

Amount ($)	Payee address; City; State; Zip Code
38 58	430 E. Redd El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	OTHER/Advertising	Materials for Signs

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

Date	Payee name
4/18	Chevron Howdy's

Amount ($)	Payee address; City; State; Zip Code
35 00	7990 Doniphan El Paso TX 79922

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	Gas for Walkers

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

Date	Payee name
4/18	Rudy's BBQ

Amount ($)	Payee address; City; State; Zip Code
15 87	6401 S. Desert Blvd El Paso TX 79932

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Food for Volunteers

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

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lyda A. Ness-Garcia	

Entry 1

4 Date	5 Payee name
4/18/11	Taco Cabana
6 Amount ($)	**7 Payee address; City; State; Zip Code**
10.77	7870 N. Mesa El Paso TX 79932

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Food/Bev Volunteers

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

Entry 2

Date	Payee name
4/18/11	Diamond Shamrock
Amount ($)	**Payee address; City; State; Zip Code**
2.99	6040 N. Mesa El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Food/Bev Volunteers

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

Entry 3

Date	Payee name
4/19	FINA 711
Amount ($)	**Payee address; City; State; Zip Code**
6.31	4858 N. Mesa El Paso 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev ~~Reimb~~ Exp	Food/Bev Volunteers

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

Entry 4

Date	Payee name
4/19	Circle K
Amount ($)	**Payee address; City; State; Zip Code**
5.11	6200 N. Mesa El Paso TX 99999

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food/Bev Expense	Food/Bev Volunteers

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

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POLITICAL EXPENDITURES

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
11	Lydia A. Ness-Garcia	

4 Date	5 Payee name
5/2/11	GO Direct

6 Amount ($)	7 Payee address; City; State; Zip Code
1528 -	8400 Boeing El Paso TX

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising	Direct mailers / postage

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

Date	Payee name
4/21/11	Patricia Valdez

Amount ($)	Payee address; City; State; Zip Code
1200 00	605 N. Laurel El Paso TX 79902

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	Signs

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

Date	Payee name
5/5/11	Reuel Group

Amount ($)	Payee address; City; State; Zip Code
481 00 -	6006 N. Mesa El Paso TX 79912

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	Advertising calls

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

Date	Payee name

Amount ($)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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

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