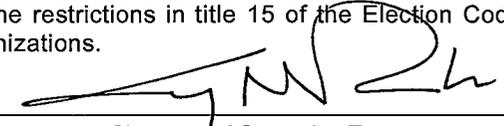


# APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA  
PG 1

See STA Instruction Guide for detailed instructions.

1 Total pages filed:

2 COMMITTEE NAME	El Paso For Equality				OFFICE USE ONLY	
3 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 609 Myrtle, suite 102 El Paso, Texas 79901					
4 CAMPAIGN TREASURER NAME	(MS / MRS / MR) FIRST MI LYDA A NICKNAME LAST SUFFIX NESS - GARCIA				Date Received	2010 DEC 16 PM 4:44
5 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 609 MYRTLE, SUITE 102 EL PASO, TEXAS 79901				HD/PM	
6 MAILING ADDRESS <input checked="" type="checkbox"/> same as above	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE				Date Processed	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 920-1849				Date Imaged	
8 PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX LYDA A NESS - GARCIA					
9 SIGNATURE	I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.   Signature of Campaign Treasurer					
10 ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST MI LAST SUFFIX DANIEL ROLLINGS					
11 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 609 MYRTLE, SUITE 102, EL PASO, TX 79901					
12 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 929 9282					

CONTINUE ON PAGE 2

This appointment is effective on the date it is filed with the commission.

**SPECIFIC-PURPOSE COMMITTEE:  
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA  
PG 2**

13 COMMITTEE NAME

*El Paso For Equality*

CITY CLERK DEPT.  
2010 DEC 16 PM 4:45

14 COMMITTEE PURPOSE

- SUPPORT CANDIDATE
- OPPOSE CANDIDATE
- ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

BALLOT IDENTIFICATION OF MEASURE / #

*NA*

ELECTION DATE

Month / Day / Year  
*5 / 14 / 2011*

- SUPPORT MEASURE
- OPPOSE MEASURE

DESCRIPTION

*Amendment to city charter for anti-discrimination clause*

15 MODIFIED REPORTING DECLARATION

**COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.**

**••This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••**

**••The modified reporting declaration is valid for one election cycle only. ••**  
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report.

\_\_\_\_\_  
Year of election(s) or election cycle to which declaration applies

\_\_\_\_\_  
Signature of Campaign Treasurer

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**