

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: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI LYDA A NICKNAME LAST SUFFIX NESS-GARCIA	OFFICE USE ONLY Date Received 2011 JUL 14 Date Hand-delivered or Postmarked PM 1:51 Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2801 N. FLORENCE EL PASO, TEXAS		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 920-1849		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI MYRYL A NICKNAME LAST SUFFIX PRICE	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 609 MYRTLE, EL PASO TX 79501		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 203 4605		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 06 / 01 / 2011 07 / 14 / 2011		
11 ELECTION	ELECTION DATE Month Day Year 6 / 11 / 2011	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) CITY REPRESENTATIVE	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	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		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

CITY CLERK DEPT.

FORM C/OH

2011 JUL 14 PM 1:51

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

EL Paso Association of Builders
Build PAC of El Paso

COMMITTEE ADDRESS

6046 Surety Drive
El Paso TX 79905

COMMITTEE CAMPAIGN TREASURER NAME

Greg Bowling

COMMITTEE CAMPAIGN TREASURER ADDRESS

6046 Surety Drive
El Paso TX 79905

additional pages

18 CONTRIBUTION TOTALS

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

\$ 400⁰⁰

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$11,505⁻

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 6804¹⁹

CONTRIBUTION BALANCE

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

\$

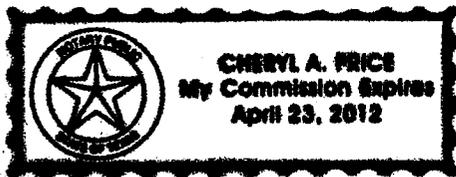
OUTSTANDING LOAN TOTALS

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

\$ 2500⁰⁰-

19 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.



AFFIX NOTARY STAMP / SEAL ABOVE

[Handwritten Signature]

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said LYDA NESS-GARCIA, this the 14th day of July, 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

CITY CLERK DEPT.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

2011 JUL 14 PM 1:51

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3	
2 FILER NAME Lyda A. Ness-Garcia		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 06-03-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMES SCHERR	7 Amount of contribution (\$) 1000 -	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 108. N. oregon, El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06-03-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT AND AGHARESE NESS	Amount of contribution (\$) 500 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1604 LORI LANE HARRISBURG PA 17110		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06-03-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LAW OFFICES OF SALAS & SALAS L.L.P.	Amount of contribution (\$) 250⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1500 MONTANA EL PASO TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06-07-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: EL PASO ASSOCIATION OF BUILDERS	Amount of contribution (\$) 1000 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6045 SURETY DRIVE EL PASO TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06-09-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RANDALL J. BOWLING	Amount of contribution (\$) 800 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4655 COHEN AVE EL PASO TX 79924		(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 for additional reporting requirements.

POLITICAL CONTRIBUTIONS CITY CLERK DEPT. **SCHEDULE A**
OTHER THAN PLEDGES OR LOANS 2011 JUL 14 PM 1:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3	
2 FILER NAME Lyda A Ness-Garcia		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-9-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustavo & Juan Lou	7 Amount of contribution (\$) 100⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 12233 Chato Villa El Paso TX 79936		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/9/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martina Aranda	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3165 Crazy Horse El Paso TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/10/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Sue Morce	Amount of contribution (\$) 30⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 124 Calle Olaso El Paso TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/10/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy & Wayne Rout	Amount of contribution (\$) 25⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 360 Rio Estancia El Paso TX 79932		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/14/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Bowling	Amount of contribution (\$) 300⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4696 Cohen Ave El Paso TX 79924		(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 for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. SCHEDULE A

2011 JUL 14 PM 1:51

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

3

2 FILER NAME

Lyda A. Ness - Grant

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6.11.11

5 Full name of contributor out-of-state PAC (ID#: _____)

Gretsemani Yanez

6 Contributor address; City; State; Zip Code

3609 Fort Blvd
El Paso TX 79930

7 Amount of contribution (\$)

7,000

8 In-kind contribution description (if applicable)

IN KIND
donational
consulting

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Consultant - Campaign Manager

10 Employer (See Instructions)

Quixote Assoc.

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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#: _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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 for additional reporting requirements.

POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Ness-Garcia	3 ACCOUNT # (Ethics Commission Filers)
4 Date 06/23/11	5 Payee Name Constant Contact	
6 Amount (\$) 32.48	7 Payee address; City; State; Zip Code www.constantcontact.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising expense	(b) Description (If travel outside of Texas, complete Schedule T) Direct email
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/15/11	Payee name Chevron	
Amount (\$) 59.08	Payee address; City; State; Zip Code 715 N. Stanton Street, El Paso, TX, 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel	Description (If travel outside of Texas, complete Schedule T) Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/14/11	Payee name El Paso Times	
Amount (\$) 2084 ⁰⁰	Payee address; City; State; Zip Code 300 N. Campbell El Paso TX 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/14/11	Payee name Chevron	
Amount (\$) 2.68	Payee address; City; State; Zip Code 715 N. Stanton Street, El Paso, TX, 79901	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.
2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Luda A. Ness Garag	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/09/11	5 Payee name GODIRECT
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6 Amount (\$) 1136 ⁰⁰	7 Payee address; City; State; Zip Code 8400 Boeing El Paso TX 79925
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Mailers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/09/11	Payee name Taco Bell
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Amount (\$) 8 ⁰⁸	Payee address; City; State; Zip Code 2103 N. Mesa, El Paso, TX 79902
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/09/11	Payee name Circle K
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Amount (\$) 51.80	Payee address; City; State; Zip Code 1700 W. Vandell, El Paso, TX 79901
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel In Dt	Description (If travel outside of Texas, complete Schedule T) Gas
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/09	Payee name Circle K
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Amount (\$) 1.69	Payee address; City; State; Zip Code 1700 W. Vandell, El Paso, TX 79901
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Bev Expense	Description (If travel outside of Texas, complete Schedule T) Food / Bev Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Ness - Garaga	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/06/11	5 Payee name Go Direct
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6 Amount (\$) 1462 ⁰⁰	7 Payee address; City; State; Zip Code 8400 Boeing, El Paso, TX, 79925
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Mailing
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06/11	Payee name Rudy's West
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Amount (\$) 757	Payee address; City; State; Zip Code 6401 South Desert Blvd, El Paso, TX, 79912
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06/11	Payee name Rudy's West
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Amount (\$) 3 ⁶⁶	Payee address; City; State; Zip Code 6401 S. Desert Blvd, El Paso, TX, 79912
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06/11	Payee name Sams Club
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Amount (\$) 70 ⁰⁰	Payee address; City; State; Zip Code 7970 N. Mesa, El Paso, TX, 79912
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CITY CLERK DEPT.

POLITICAL EXPENDITURES **SCHEDULE F**

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME: Lyda A. Mess - Garza	3 ACCOUNT # (Ethics Commission Filers)
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4 Date: 06/06/11	5 Payee name: Office Depot
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6 Amount (\$): 2489	7 Payee address; City; State; Zip Code: 801 Sunland Park #B, El Paso TX 79912
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Adv Expense	(b) Description (if travel outside of Texas, complete Schedule T): Supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 06/06/11	Payee name: Taco Tote
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Amount (\$): 1546	Payee address; City; State; Zip Code: 2921 N. Mesa, El Paso TX 79902
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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): Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 06/06/11	Payee name: Taco Tote
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Amount (\$): 1015	Payee address; City; State; Zip Code: 2921 N. Mesa, El Paso TX 79902
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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): Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 06/06	Payee name: Starbucks
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Amount (\$): 590	Payee address; City; State; Zip Code: 2300 Mesa, El Paso TX 79902
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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): Volunteer
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Ness-Garuga	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/09/11	5 Payee name: Circle K
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6 Amount (\$) 1.49	7 Payee address; City; State; Zip Code 1700 W. Vandell, El Paso, TX, 79901
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food Bev Exp	(b) Description (If travel outside of Texas, complete Schedule T) Volunteers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/08/11	Payee name Oscar Silva
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Amount (\$) 18.00	Payee address; City; State; Zip Code 3417 Rising Sun, El Paso, TX, 79936
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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) Tamales volunteer
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/08	Payee name Dunkin Donuts
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Amount (\$) 6.80	Payee address; City; State; Zip Code 3100 Mesa, El Paso, TX, 79902
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06/11	Payee name Getsemani Yanez
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Amount (\$) 711.00	Payee address; City; State; Zip Code 3609 Fort Blvd., El Paso, TX, 79900
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Exp	Description (If travel outside of Texas, complete Schedule T) CONSULTATION
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CITY CLERK DEPT.

POLITICAL EXPENDITURES

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Ness - Gragas	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/06	5 Payee name FINA 711
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6 Amount (\$) 2.93	7 Payee address; City; State; Zip Code 711 E. Robinson El Paso TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) FOOD / Bev Exp	(b) Description (If travel outside of Texas, complete Schedule T) Volunteers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06	Payee name Diamond Shamrock
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Amount (\$) 3.31	Payee address; City; State; Zip Code 4201 N. Mesa El Paso TX 79902
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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) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/06/11	Payee name Subway
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Amount (\$) 3.25	Payee address; City; State; Zip Code 2625 N. Mesa El Paso TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD / Exp	Description (If travel outside of Texas, complete Schedule T) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/03	Payee name Diamond Shamrock
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Amount (\$) 96.37	Payee address; City; State; Zip Code 4201 Mesa Hills El Paso TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Exp In Dt	Description (If travel outside of Texas, complete Schedule T) Gas
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Mess Gracia	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/03/11	5 Payee name Walgreens
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6 Amount (\$) 14.88	7 Payee address, City; State; Zip Code 2800 N. Mesa El Paso TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food Bev	(b) Description (If travel outside of Texas, complete Schedule T) Volunteers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/03/11	Payee name Lucy's Restaurant
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Amount (\$) 11.50	Payee address; City; State; Zip Code 4119 N. Mesa El Paso TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Bev	Description (If travel outside of Texas, complete Schedule T) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/03/11	Payee name Diamond Shamrock
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Amount (\$) 7.03	Payee address; City; State; Zip Code 4201 N Mesa Hills El Paso TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Bev	Description (If travel outside of Texas, complete Schedule T) Volunteer
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/03	Payee name Diamond Shamrock
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Amount (\$) 4.53	Payee address; City; State; Zip Code 4201 Mesa Hills El Paso TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Bev	Description (If travel outside of Texas, complete Schedule T) Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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: 8	2 FILER NAME Lyda A. Ness - Garcia	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06/10/11	5 Payee name Lucu's Restaurant
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6 Amount (\$) 8 ⁰⁰	7 Payee address; City; State; Zip Code 4119 N. Mesa, El Paso, TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food / Bev Exp	(b) Description (If travel outside of Texas, complete Schedule T) Food / Bev Volunteers
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/10/11	Payee name Urde K
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Amount (\$) 6 ³⁵	Payee address; City; State; Zip Code 1400 W. Yandell, El Paso, TX 79901
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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) Food / Bev Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/10/11	Payee name TacoBell
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Amount (\$) 431	Payee address; City; State; Zip Code 2103 N. Mesa, El Paso, TX, 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food / Bev	Description (If travel outside of Texas, complete Schedule T) Food / Bev Volunteers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/09/11	Payee name Regency Printing
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Amount (\$) 860. ⁰⁵	Payee address; City; State; Zip Code 2020 N. Piedras, El Paso, TX, 79930
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

CITY CLERK DEPT. SCHEDULE I

2011 JUL 14 PM 1:52

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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| 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 I: 1	2 FILER NAME Lyda A Ness - Garcia	3 ACCOUNT # (Ethics Commission Filers)
4 Date 6/10/11	5 Payee name Supreme Laundry	
6 Amount (\$) 18.48	7 Payee address; City; State; Zip Code 2703 N Stanton El Paso TX 79902	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (See instructions regarding type of information required.) Alteration / drycleaning
Date 06/08/11	Payee name Wells Fargo	
Amount (\$) 3.00	Payee address; City; State; Zip Code 2340 N. Mesa El Paso TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting / Banking	Description (See instructions regarding type of information required.) Bank fee
Date 07/11/11	Payee name Wells Fargo	
Amount (\$) 3.00	Payee address; City; State; Zip Code 2340 N. Mesa El Paso TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting / Banking	Description (See instructions regarding type of information required.) Bank fee
Date 06/06/11	Payee name Getsemani Yanez	
Amount (\$) 44.48	Payee address; City; State; Zip Code 3609 Fort Blvd El Paso TX 79930	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consult Expense	Description (See instructions regarding type of information required.) Reimbursement

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