

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 # <small>(Ethics Commission Filers)</small>	2 Total pages filed:												
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. TIMOTHY A ----- NICKNAME LAST SUFFIX Tim BESCO	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="2" style="text-align: center;">OFFICE USE ONLY</th></tr> <tr><td style="width:50%;">Date Received</td><td style="width:50%; text-align: center;">2011 APR 13 CITY CLERK DEPT.</td></tr> <tr><td>Date Hand-delivered or Postmarked</td><td style="text-align: center;">PM 2:24</td></tr> <tr><td>Receipt #</td><td>Amount</td></tr> <tr><td>Date Processed</td><td></td></tr> <tr><td>Date Imaged</td><td></td></tr> </table>		OFFICE USE ONLY		Date Received	2011 APR 13 CITY CLERK DEPT.	Date Hand-delivered or Postmarked	PM 2:24	Receipt #	Amount	Date Processed		Date Imaged	
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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 5808 SUNDALE EL PASO TX 79912														
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 317-1235														
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI MR. REJE ----- NICKNAME LAST SUFFIX GONZALEZ														
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7505 KINGMAN EL PASO TX 79915														
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 256 1965														
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> Final report (Attach C/OH - FR)														
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 3 / 10 / 2011 4 / 14 / 2011														
11 ELECTION	ELECTION DATE Month Day Year 5 / 14 / 2011	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special													
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) CITY REPRESENTATIVE, DISTRICT #1													
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

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

TIMOTHY A. BESEO

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

LET'S GO BESEO CAMPAIGN COMMITTEE

COMMITTEE ADDRESS

*P.O. BOX 12523
EL PASO, TX 79913*

COMMITTEE CAMPAIGN TREASURER NAME

RENE GONZALEZ

COMMITTEE CAMPAIGN TREASURER ADDRESS

*7505 KINGMAN
EL PASO, TX 79915*

additional pages

18 CONTRIBUTION TOTALS

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

\$ *0*

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

\$ *0*

EXPENDITURE TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *232.83*

CONTRIBUTION BALANCE

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

\$

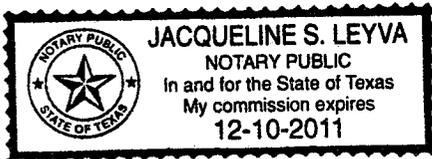
OUTSTANDING LOAN TOTALS

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

\$

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.



T. A. Beso

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Timothy A. Beso*,
13th day of *April*, 20 *11*, to certify which, witness my hand and seal of office.

Jacqueline S. Leyva
Signature of officer administering oath

Jacqueline S. Leyva
Printed name of officer administering oath

Notary
Title of officer administering oath

CITY CLERK DEPT
2011 APR 13 PM 2:22

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G:	2 FILER NAME <i>TIMOTHY A. BESCO</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>3-30-11</i>	5 Payee name <i>ARLENE CHAVEZ</i>
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6 Amount (\$) <i>\$150.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>3744 MAUREEN EL PASO, TX 79904</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>PRINTING EXPENSE</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>SIGNS</i>
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Date <i>3-31-11</i>	Payee name <i>HOME DEPOT</i>
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Amount (\$) <i>\$82.83</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>7545 N. MESA EL PASO, TX 79912</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>ADVERTISING EXPENSES</i>	Description (If travel outside of Texas, complete Schedule T) <i>STAKES AND ZIPTIES</i>
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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CITY CLERK DEPT.
2011 APR 13 PM 2:24

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED