

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: <div style="font-size: 2em; text-align: center;">5</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI MR PRESILIANO NICKNAME LAST SUFFIX "PRESI" ORTEGA JR	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked 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 11628 LAURA MARIE EL PASO TX 79936		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 778 - 2424		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI MR. ALAN E NICKNAME LAST SUFFIX SIMPSON		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1932 PREVIEW PLACE EL PASO TX 79936		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 591 - 1848		
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 checked="" 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 01 / 01 / 2006 6 / 30 / 2006		
11 ELECTION	ELECTION DATE Month Day Year N/A / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) CITY REP. DISTRICT 5	13 OFFICE SOUGHT (if known) N/A	
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 PRESI ORTEGA CAMPAIGN **16 ACCOUNT # (Ethics Commission Filers)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

.. This box is for notice of political expenditures 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

CITY CLERK REPORT
06 JUL 17 AM 10:37

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	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 6090 ⁰⁰
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8949.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said PRESILIANO ORTEGA, this the 17th day of July, 20 06, to certify which, witness my hand and seal of office.

Dolores M. Jenkins
Signature of officer administering oath

DOLORES M JENKINS
Printed name of officer administering oath

Notary
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

CITY CLERK
JUL 17 AM 10:37

The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A: <u>1</u>	
2 FILER NAME <u>PRES: ORTEGA CAMPAIGN</u>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <u> </u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>NONE</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date	Full name of contributor <input type="checkbox"/> 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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Date	Full name of contributor <input type="checkbox"/> 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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Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date	Full name of contributor <input type="checkbox"/> 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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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

CITY CLERK
06 JUL 17 AM 10:37

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.	1 Total pages Schedule F: 2
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2 FILER NAME PRES. ORTEGA CAMPAIGN	3 ACCOUNT # (Ethics Commission filers)
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4 Date	5 Payee name SEE ATTACHED	7 Amount (\$)
	6 Payee address; City; State; Zip Code	

8 Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete 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 payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**Political Expenditures
Presi Ortega Campaign
July 15, 2006**

CITY CLERK
06 JUL 17 AM 10:37

Date	Name Address	Amount of Expenditure	Purpose
Feb 13	LULAC Council #9 El Paso, TX	500.00	Donation
Feb 13	Tejano Democrats El Paso, TX	100.00	Donation
Feb 13	Avila's Mexican Food 10600 Montana El Paso, TX 79936	70.00	Breakfast Mtgs 6 mos
Feb 16	Plaza Theater El Paso, TX	500.00	Donation
Mar 31	Anthony Cobos Campaign 4047 Emory Dr. El Paso, TX	2,000.00	Political Contribution
Apr 12	Anthony Cobos Campaign 4047 Emory Dr. El Paso, TX	2,000.00	Political Contribution
Apr 21	Dr. Tony Marquez El Paso, TX	500.00	Political Contribution
Apr 28	Boy Scouts of America Yucca Chapter El Paso, TX	250.00	Donation
Apr 28	Mayor John Cook Prayer Breakfast El Paso, TX	100.00	Donation
Apr 28	Avila's 10600 Montana El Paso, TX 79936	70.00	Breakfast Mtgs 6 mos

Total Expenditures January 1, 2006 – June 30, 2006

\$6,090.00