

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: 2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Steve	OFFICE USE ONLY Date Received 10 JUL 15 AM 8:46 CITY CLERK DEPT.	
	NICKNAME LAST SUFFIX Ortega		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1644 Lomeland # 150 El Paso, TX 79935	Date Hand-delivered or Date Postmarked	
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION (915) 383-3651	Receipt # Amount 8:46	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI SAMZ	Date Processed	
	NICKNAME LAST SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE SAMZ		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () SAME		
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 1 / 15 / 10 7 / 15 / 10		
11 ELECTION	ELECTION DATE Month Day Year / /	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. Dist. #7	13 OFFICE SOUGHT (if known)	
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

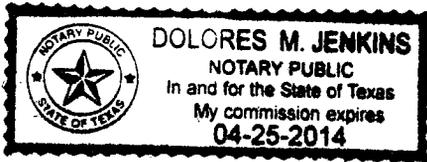
15 C/OH NAME	16 ACCOUNT # (Ethics Commission Filers)
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17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

CITY CLERK DEPT.
10 JUL 15 AM 8:46

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ \emptyset
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \emptyset
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ \emptyset
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 11. $\frac{47}{20}$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \emptyset

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 16 Election Code.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Steve Ortega, this the 15th day of July, 20 10, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering oath

Dolores M. Jenkins

Printed name of officer administering oath

[Handwritten Signature]

Title of officer administering oath