

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:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Mr.</i> NICKNAME <i>"Eddie"</i>	FIRST <i>Eduardo</i> LAST <i>Holguin</i>	MI SUFFIX <i>Jr.</i>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>PO BOX 17726 El Paso TX 79917</i>		OFFICE USE ONLY Date Received <div style="text-align: right; font-size: small;">CITY CLERK DEPT. 2011 JUL 18 PM 5:11</div> Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>()</i>			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Mrs.</i> NICKNAME <i>Holguin</i>	FIRST <i>Iliana</i> LAST <i>Holguin</i>		MI <i>N.</i> SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>501 E. Nevada El Paso, TX 79902</i>			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>()</i>			
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 <i>5 / 6 / 11</i> <i>7 / 15 / 11</i>			
11 ELECTION	ELECTION DATE Month Day Year <i>5 / 14 / 11</i>	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) <i>City Rep. Dist. #6</i>	13 OFFICE SOUGHT (if known) <i>City Rep. Dist. #6</i>		
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 Eddie Holguin Jr. 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME	CITY CLERK DEPT. 2011 JUL 18 PM 5:41
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,850. ³⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,435. ⁷⁵
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,995. ⁵⁹
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.

Eddie Holguin Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Eddie Holguin Jr., this the 18th day of July, 2011, 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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Eddie Holguin Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/6/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D. Jaquez	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 205 Liberty St. El Paso, TX 79907		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/6/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Rubin	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 535 Laurel Canyon El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/6/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Shane	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4695 North Mesa El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/6/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Isaac Smith	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 405 Sharsudale El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/6/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Bowling III	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 457 San Clemente El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

CITY CLERK DEPT.
JUL 18 11 51:41

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

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Eddie Holguin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/6/11

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

Mike Dipp

6 Contributor address; City; State; Zip Code

1000 E. Overland
El Paso, TX 79901

7 Amount of contribution (\$)

\$200

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/6/11

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

Joe Vargas, Jr.

Contributor address; City; State; Zip Code

2305 Sparkman Street
El Paso, TX 79903

Amount of contribution (\$)

\$50

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/11

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

Irene Esquivel

Contributor address; City; State; Zip Code

339 N. Zaragoza
El Paso, TX 79907

Amount of contribution (\$)

\$40

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/10/11

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

TX Assoc. of Realtors PAC

Contributor address; City; State; Zip Code

PO Box 2246
Austin, TX 78768

Amount of contribution (\$)

\$1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/11

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

Bertha Pedregon

Contributor address; City; State; Zip Code

10128 Suez
El Paso, TX 79925

Amount of contribution (\$)

\$50

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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JUL 18 PM 5:11

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Eddie Holquin Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/13/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Saab	7 Amount of contribution (\$) \$500	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 8340 Gateway East Ste. 205 El Paso, TX 79907		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/13/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GC Services	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6330 Guttaton Houston, TX 77081		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/14/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggie Martinez	Amount of contribution (\$) \$50	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1819 Robert Wynn El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/14/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. Perez	Amount of contribution (\$) \$30	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12249 Warhol Dr. El Paso, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/16/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Foster	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6000 Surety Dr. #300 El Paso, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Eddie Holguin Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/6/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Douglas A. Schwartz 6 Contributor address; City; State; Zip Code PO Box 13611 El Paso, TX 79913	7 Amount of contribution (\$) \$500	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/9/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: El Paso Assoc. of Firefighters Contributor address; City; State; Zip Code 3112 Farney El Paso, TX 79935	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Norma Chavez Contributor address; City; State; Zip Code 6056 Trawbridge El Paso, TX 79905	Amount of contribution (\$) \$250	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lorena Mejorado Dennis Contributor address; City; State; Zip Code 11932 Pueblo Amable El Paso, TX 79936	Amount of contribution (\$) \$1.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/9/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bernardo V. Lopez Jr. Contributor address; City; State; Zip Code 603 Prospect El Paso, TX 79902	Amount of contribution (\$) \$1.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Eddie Holguin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/9/11

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

Kathy Lopez

6 Contributor address; City; State; Zip Code

8739 Cathedral
El Paso, TX 79907

7 Amount of contribution (\$)

\$100

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/13/11

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

Eddie Holguin Sr.

Contributor address; City; State; Zip Code

8736 Winchester
El Paso, TX 79907

Amount of contribution (\$)

\$30.30

In-kind contribution description (if applicable)

Photo card

(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#: _____)

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)

Date

Full name of contributor 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)

Date

Full name of contributor 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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

2011 JUN 10 PM 5:41
CITY CLERK DEPT.

POLITICAL EXPENDITURES

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:		2 FILER NAME <i>Eddie Holguin Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5-4-11</i>		5 Payee name <i>Fed Ex Kinkos</i>			
6 Amount (\$) <i>\$23.42</i>		7 Payee address; City; State; Zip Code <i>1410 N. Lee Trevino El Paso TX 79936</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>advertising expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>post cards</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-6-11</i>		Payee name <i>Lorena Mejorado Dennis</i>			
Amount (\$) <i>\$400</i>		Payee address; City; State; Zip Code <i>9173 Socorro Rd. El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>office overhead</i>		Description (If travel outside of Texas, complete Schedule T) <i>rent</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-7-11</i>		Payee name <i>Ramon Rios</i>			
Amount (\$) <i>\$35</i>		Payee address; City; State; Zip Code <i>201 Maravilla El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>other</i>		Description (If travel outside of Texas, complete Schedule T) <i>books</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-11-11</i>		Payee name <i>H+H Dinero Tree</i>			
Amount (\$) <i>\$427.12</i>		Payee address; City; State; Zip Code <i>9020 Mayflower El Paso, TX 79925</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>advertising expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>mailers</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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2011 JUL 18 PM 5:11

POLITICAL EXPENDITURES

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:	2 FILER NAME <i>Eddie Holguin Jr.</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>5-6-11</i>	5 Payee name <i>El Roble Mexican Restaurant</i>	
6 Amount (\$) <i>\$9.96</i>	7 Payee address; City; State; Zip Code <i>5550 Alameda, El Paso, TX 79907</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/beverage</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Food for volunteers</i>
	Candidate / Officeholder name	Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <i>5-6-11</i>	Payee name <i>Our Lady of Mt. Carmel Church</i>	
Amount (\$) <i>\$75.00</i>	Payee address; City; State; Zip Code <i>131 S. Zaragoza, El Paso, TX 79907</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>event expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>fundraiser</i>
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <i>5-7-11</i>	Payee name <i>Church's #245</i>	
Amount (\$) <i>\$9.94</i>	Payee address; City; State; Zip Code <i>El Paso, TX 79907</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food for volunteers</i>
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <i>5-7-11</i>	Payee name <i>Gabriel's Cafe</i>	
Amount (\$) <i>\$13.52</i>	Payee address; City; State; Zip Code <i>9100 Alameda, El Paso, TX 79907</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>Food for volunteers</i>
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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CITY CLERK DEPT.

POLITICAL EXPENDITURES

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:		2 FILER NAME <i>Eddie Holman Jr</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5-7-11</i>		5 Payee name <i>Sams Club</i>			
6 Amount (\$) <i>\$136.21</i>		7 Payee address; City; State; Zip Code <i>11360 Pellicano El Paso, TX 79936</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Food/beverage</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>snacks for Election Day</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-9-11</i>		Payee name <i>El Roble Mexican Restaurant</i>			
Amount (\$) <i>\$8.99</i>		Payee address; City; State; Zip Code <i>8820 Alameda El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>food/beverage</i>		Description (If travel outside of Texas, complete Schedule T) <i>food for volunteers</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-9-11</i>		Payee name <i>La Tapatia</i>			
Amount (\$) <i>\$36.00</i>		Payee address; City; State; Zip Code <i>8941 Old County El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>food/beverage</i>		Description (If travel outside of Texas, complete Schedule T) <i>food for volunteers</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-9-11</i>		Payee name <i>Landry's Seafood House</i>			
Amount (\$) <i>\$278.99</i>		Payee address; City; State; Zip Code <i>6801 Gateway West El Paso, TX 79925</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fundraising expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Fundraiser</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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2011 JUL 18 PM 5:11

POLITICAL EXPENDITURES

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:	2 FILER NAME Eddie Holguin Jr	3 ACCOUNT # (Ethics Commission Filers)
----------------------------------	---	---

4 Date 5-9-11	5 Payee name Wal-Mart
-------------------------	---------------------------------

6 Amount (\$) \$15.94	7 Payee address; City; State; Zip Code 9411 Alameda, El Paso, TX 79907
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) polling expense	(b) Description (If travel outside of Texas, complete Schedule T) Supplies for Election Day
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 5-10-11	Payee name Sonic
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Amount (\$) \$4.63	Payee address; City; State; Zip Code 9505 Socorro Ave., El Paso, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) drinks for 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 5-10-11	Payee name El Roble Mexican Restaurant
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Amount (\$) \$10.01	Payee address; City; State; Zip Code 8820 Alameda, El Paso, TX 79907
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) food for 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 5-11-11	Payee name Wal-Mart
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Amount (\$) \$9.16	Payee address; City; State; Zip Code 9411 Alameda, El Paso, TX 79907
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) drinks for 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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POLITICAL EXPENDITURES

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:		2 FILER NAME <i>Eddie Holguin Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5-12-11</i>		5 Payee name <i>US Postmaster</i>			
6 Amount (\$) <i>\$1,009.80</i>		7 Payee address; City; State; Zip Code <i>Boeing Station El Paso TX 79905</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>advertising expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>postage</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-12-11</i>		Payee name <i>H + H Diners Tree</i>			
Amount (\$) <i>\$441.89</i>		Payee address; City; State; Zip Code <i>9050 Marshall El Paso, TX 79905</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>mail</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-12-11</i>		Payee name <i>Rubber Ducky Screen Printing</i>			
Amount (\$) <i>\$441.27</i>		Payee address; City; State; Zip Code <i>8610 North Loop El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>t-shirts</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5-13-11</i>		Payee name <i>Joe's Meat Market</i>			
Amount (\$) <i>\$60.34</i>		Payee address; City; State; Zip Code <i>100 N. Old Pueblo El Paso, TX 79907</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>food/beverage</i>		Description (If travel outside of Texas, complete Schedule T) <i>food for volunteers</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

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:	2 FILER NAME Eddie Holguin Jr	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-13-11	5 Payee name Zippy Printing Center	
6 Amount (\$) \$104.95	7 Payee address; City; State; Zip Code 2855 Pershing, El Paso, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) printing expense	(b) Description (If travel outside of Texas, complete Schedule T) push cards
	Candidate / Officeholder name	Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 5-14-11	Payee name 7-11 # 59336	
Amount (\$) \$30.30	Payee address; City; State; Zip Code 11761 Vista del Sol El Paso, TX 79936	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) food for volunteers
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 5-14-11	Payee name 7-11 # 59336	
Amount (\$) \$25.49	Payee address; City; State; Zip Code 11761 Vista del Sol El Paso, TX 79936	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) food for volunteers
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 5-14-11	Payee name El Nopal #1	
Amount (\$) \$825	Payee address; City; State; Zip Code 1155 N. Zaragoza #A101 El Paso, TX 79907	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) food/beverage	Description (If travel outside of Texas, complete Schedule T) Election Day party
	Candidate / Officeholder name	Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES

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:	2 FILER NAME <i>Eddie Holguin Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>5-14-11</i>	5 Payee name <i>Anita Salindo</i>
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6 Amount (\$) <i>\$200</i>	7 Payee address; City; State; Zip Code <i>El Paso, TX</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>advertising expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>phone banking</i>
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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 <i>5-14-11</i>	Payee name <i>Norma Chavez</i>
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Amount (\$) <i>\$174</i>	Payee address; City; State; Zip Code <i>El Paso, TX</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>advertising expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>phone banking</i>
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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 <i>5-14-11</i>	Payee name <i>Pgt Belly's Pizza</i>
------------------------	--

Amount (\$) <i>\$213.32</i>	Payee address; City; State; Zip Code <i>800 N. Zaragoza El Paso, TX 79907</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>food/beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>pizza for Election Day</i>
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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 <i>5-14-11</i>	Payee name <i>7-11 # 57613</i>
------------------------	-----------------------------------

Amount (\$) <i>\$36.27</i>	Payee address; City; State; Zip Code <i>6360 Airport El Paso, TX 79925</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>travel in district</i>	Description (If travel outside of Texas, complete Schedule T) <i>fuel</i>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

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 | Printing Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | | 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:	2 FILER NAME Eddie Holguin Jr	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-13-11	5 Payee name Wal-Mart
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6 Amount (\$) \$83.60	7 Payee address; City; State; Zip Code 9411 Alameda El Paso, TX 79907
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) polling 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 6-1-11	Payee name Wells Fargo Bank
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Amount (\$) \$19.95	Payee address; City; State; Zip Code El Paso, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) banking	Description (If travel outside of Texas, complete Schedule T) checkbooks
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-6-11	Payee name Prime NY
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Amount (\$) \$550.00	Payee address; City; State; Zip Code Woolworth Bldg. New York, NY 10279
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising expense	Description (If travel outside of Texas, complete Schedule T) campaign materials
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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 6-7-11	Payee name Lorena Mejorado Dennis
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Amount (\$) \$608.32	Payee address; City; State; Zip Code 9173 Sacorno Rd. El Paso, TX 79907
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) rent/utilities
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

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:		2 FILER NAME Eddie Holguin Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-20-11		5 Payee name Sierra Springs			
6 Amount (\$) \$80.79		7 Payee address; City; State; Zip Code PO Box 660579 Dallas TX 75266			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead		(b) Description (If travel outside of Texas, complete Schedule T) water	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date 6-20-11		5 Payee name Superior Imaging			
6 Amount (\$) \$142.87		7 Payee address; City; State; Zip Code 2001 Grant Ave El Paso, TX 79930			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead		(b) Description (If travel outside of Texas, complete Schedule T) copier rental	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date 5-16-11		5 Payee name Eddie + Iliana Holguin			
6 Amount (\$) \$717.48		7 Payee address; City; State; Zip Code 241 Elvin way El Paso, TX 79907			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) reimbursement		(b) Description (If travel outside of Texas, complete Schedule T) reimbursement of expenses	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
4 Date		5 Payee name			
6 Amount (\$)		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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>Eddie Holgmin Jr.</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>5-14-11</i>	5 Payee name <i>Enterprise</i>
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6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$189.73</i>	7 Payee address; City; State; Zip Code <i>El Paso International Airport El Paso, TX</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>travel in district</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>rental car</i>
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Date <i>5-14-11</i>	Payee name <i>Howdy #1308</i>
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>\$19.81</i>	Payee address; City; State; Zip Code <i>8500 Alameda El Paso, TX</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>polling expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>ice bags</i>
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Date <i>5-14-11</i>	Payee name <i>Dominos Pizza</i>
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended <i>\$19.45</i>	Payee address; City; State; Zip Code <i>#6890 El Paso, TX 79907</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>food/beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>food for volunteers</i>
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Date <i>5-14-11</i>	Payee name <i>Walgreens</i>
------------------------	--------------------------------

Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$23.08</i>	Payee address; City; State; Zip Code <i>Store # 5526 11685 Montwood El Paso, TX 79936</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>polling expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>chair</i>
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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>Eddie Holguin Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>5-7-11</i>	5 Payee name <i>Chihua's Restaurant</i>
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6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$85.17</i>	7 Payee address; City; State; Zip Code <i>1921 N. Zaragoza</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>food/beverage</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>lunch for volunteers</i>
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Date <i>5/13/11</i>	Payee name <i>Goodtimes #60</i>
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Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$19.15</i>	Payee address; City; State; Zip Code <i>745 N. Zaragoza El Paso, TX</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>travel in district</i>	Description (If travel outside of Texas, complete Schedule T) <i>gas</i>
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Date <i>5/13/11</i>	Payee name <i>Lowe's Big 8</i>
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Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$8.56</i>	Payee address; City; State; Zip Code <i>9016 Alameda El Paso, TX 79907</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>food/beverage</i>	Description (If travel outside of Texas, complete Schedule T) <i>food for volunteers</i>
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Date <i>5/14/11</i>	Payee name <i>Goodtimes #60</i>
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Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <i>\$79.19</i>	Payee address; City; State; Zip Code <i>745 N. Zaragoza El Paso, TX</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>travel in district</i>	Description (If travel outside of Texas, complete Schedule T) <i>gas</i>
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