

CANDIDATE / OFFICEHOLDER REPORT
SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2013 JAN 15 PM 3:46

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 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

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 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)

\$ 15,035.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 2,593.43

CONTRIBUTION BALANCE

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

\$ 5,472.31

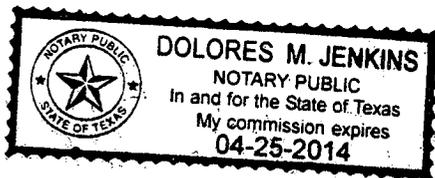
OUTSTANDING LOAN TOTALS

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

\$ - 0 -

18 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.



Detsemani Yang
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Detsemani Yang*, this the 15th day of January, 2013, 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**CITY CLERK DEPT.
2013 JAN 15 PM 3:46**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/3/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manuel Carrillo 6 Contributor address; City; State; Zip Code 2400 Don Andres Rd., SW, Albuquerque, NM 87105	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Principal		10 Employer (See Instructions) Carrillo Painting, Inc.	
Date 8/1/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudhead Media, LLC. Contributor address; City; State; Zip Code 5290 McNutt Santa Teresa, NM 88008	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable) Website Design, Hosting & Management
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Dawson Contributor address; City; State; Zip Code SH29 Lake Cherokee, Henderson, TX 75652	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Chemical / Environmental technician		Employer (See Instructions) Lumimnant	
Date 8/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Esther Salomon Contributor address; City; State; Zip Code 3403 Mobile Avenue, El Paso, TX 79930	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) AMB Construction	
Date 8/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinai Newberry Contributor address; City; State; Zip Code P.O. Box 724 Tatum, TX 75601	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) House Wife		Employer (See Instructions) None	

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

2013 JAN 15 PM 3:46

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/4/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernando Castillo	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2207 Rountree Dr., Austin, TX 78722		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Legal Assistant		10 Employer (See Instructions) Catholic Charities of Central Texas	
Date 10/2/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Cruz	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1021 S. Charloree, Lombard, IL 60148		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Director of Civic Engagement		Employer (See Instructions) Labor Council for Latin American Advancement	
Date 10/4/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salomon Ramirez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2525 McKinley Ave., El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Ramcom Painting	
Date 10/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esteban Morales	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11659 Leesborough Circle, Silver Spring, MD 20902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) U.S. Department of Labor	
Date 10/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose Yanez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 724 Tatum, TX 75691		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Safety Inspector		Employer (See Instructions) Fluor Global	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

CITY CLERK DEPT.

The Instruction Guide explains how to complete this form. 2013 JAN 15 3 08 PM '13 Total pages: Schedule A: 3 of 8

2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/23/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Smith	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 405 Sharondale, El Paso, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/29/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert G. Neill	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 Executive Center, El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions) Neill Strelitz Law	
Date 11/1/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quixote and Associates, LLC.	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) Campaign Management
Contributor address; City; State; Zip Code 3609 Fort Blvd., El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/9/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Ro & Marina Monsisvais	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2009 Pittsburg Ave., El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Eastside Dental Care	
Date 11/25/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Close	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 81 Greensward Ln., Sugarland, TX 77479		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) House Wife		Employer (See Instructions) None	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/1/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quixote and Associates, LLC. 6 Contributor address; City; State; Zip Code 3609 Fort Blvd., El Paso, TX 79930	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable) Campaign Management (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/1/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teresa Ramirez Contributor address; City; State; Zip Code 350 Festival Drive Apt. 1609, El Paso, TX 79912	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) NONE	
Date 12/1/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexis Reynoso Contributor address; City; State; Zip Code 4211 Darwood, El Paso, TX 79902	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None	
Date 12/1/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniela Ramirez Contributor address; City; State; Zip Code 3032 Monroe Ave., El Paso, TX 79930	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None	
Date 12/3/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louie Salazar & Anna Aleman Contributor address; City; State; Zip Code 3431 Fort Blvd., El Paso, TX 79930	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Clear Channel Outdoor		Employer (See Instructions) VP of Sales	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 5 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/6/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Yanez	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 112 Count Road 870F, Alvin, TX 77511		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Safety Inspector		10 Employer (See Instructions) Fluor Global	
Date 12/6/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor Orozco	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2308 Escarpa El Paso, TX 79935		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Diesel Mechanic		Employer (See Instructions) Mesilla Valley Transportation	
Date 12/7/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector Ramirez	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2324 Summer Place, Arlington, TX		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None	
Date 12/11/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique Moreno	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 701 Magoffin Avenue, El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions) Moreno Law	
Date 12/14/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soliris Morales	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3216 Hamilton El Paso, TX 79930		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Quixote and Associates, LLC.	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

SCHEDULE A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 6 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenzo Sosa	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 971122, El Paso, TX 79997		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) Texas Enforcer, LLC.	
Date 12/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AEDIFIC EQUIPMENT, LLC	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. BOX 920086 El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oscar Ramirez	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11750 Old Georgetown Rd. # 2413, North Bethesda, MD 20852		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Podesta Group Government Relations	
Date 12/27/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Aureliano Spencer, Jr.	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1009 Montana., El Paso, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney & Counselor at Law		Employer (See Instructions) Joe Spencer Law	
Date 12/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marisela Salayandia	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1343 Monroe St. NW, Unit A, Washington, DC 20010		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Professional Staff		Employer (See Instructions) U.S. House of Representatives	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 7 of 8	
2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/28/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicky R. Salayandia	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 512 Olano El Paso, TX 79927		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) None	
Date 12/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oscar Ramirez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11750 Old Georgetown Rd. #2413, North Bethesda, MD 20852		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Podesta Group Government Relations	
Date 12/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgina Ramirez	Amount of contribution (\$) \$45.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7756 Acapulco El Paso, TX 79915		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) AMN Healthcare	
Date 12/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose Salayandia	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 501 Texas Ave, Ste 1 El Paso, TX 79901		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jose Salayandia	
Date 12/31/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgina Ramirez	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7756 Acapulco El Paso, TX 79915		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) AMN Healthcare	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

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SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME
Getsemani Yañez

3 ACCOUNT # (Ethics Commission Filers)

4 Date
12/31/12

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

7 Amount of contribution (\$)
\$250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
1343 Monroe St. NW, Unit A, Washington, DC 20010

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Professional Staff

10 Employer (See Instructions)
U.S. House of Representatives

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.

2013 JAN 15 PM 3:47

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: 1 of 6	2 FILER NAME Getsemani Yañez	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7/7/2012	5 Payee name Go Daddy
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6 Amount (\$) \$22.84	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd. Suite 219, Scottsdale, AZ 85260
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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) Website Domain Fee
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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 7/18/2012	Payee name Coyote Strategies
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 600 Linda El Paso, TX 79922
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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) Design of campaign signage
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7/25/2012	Payee name Print Spot
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Amount (\$) \$5.30	Payee address; City; State; Zip Code 4424 N. Mesa, El Paso, TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Printing of Button Logos
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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 7/30/2012	Payee name Joe Vinny and Bronsons
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Amount (\$) \$4.57	Payee address; City; State; Zip Code 824 N. Piedras El Paso, TX 79903
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/ Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Beverages for Campaign Meeting
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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

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 of 6	2 FILER NAME Getsemani Yañez	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/10/2012	5 Payee name Office Depot #195	
6 Amount (\$) \$99.28	7 Payee address; City; State; Zip Code 1111 Gateway Drive, El Paso, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/13/2012	Payee name Diamond Shamrock #1359	
Amount (\$) \$65.04	Payee address; City; State; Zip Code 4201 N. Mesa El Paso, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transpotation Expense	Description (If travel outside of Texas, complete Schedule T) Gas Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/20/2012	Payee name The Garden Restaurant	
Amount (\$) \$13.00	Payee address; City; State; Zip Code 511 Western El Paso, TX 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food/Beverage for Democratic Party Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/22/2012	Payee name Joe Vinny And Bronsons	
Amount (\$) \$5.57	Payee address; City; State; Zip Code 824 N. Piedras El Paso, TX 79903	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and beverage for campaign meeting
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.

2013 JAN 15 PM 3:47

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: 3 of 6	2 FILER NAME Getsemani Yañez	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 8/23/2012	5 Payee name Walmart Supercenter
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6 Amount (\$) \$48.20	7 Payee address; City; State; Zip Code 7101 Gateway Blvd., El Paso, TX 79925
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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) Office 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 8/24/2012	Payee name Circle K #06130
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Amount (\$) \$50.52	Payee address; City; State; Zip Code 3910 Dyer St. El Paso, TX 79930
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation Expense	Description (If travel outside of Texas, complete Schedule T) Gas Expense
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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 8/23/12	Payee name Pho Tre Bien Express
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Amount (\$) \$9.95	Payee address; City; State; Zip Code 4309 Fred Wilson Ave. #B, El Paso, TX 79904
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and beverage for campaign meeting
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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 9/7/2012	Payee name Joe Vinny and Bronsons
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Amount (\$) \$6.52	Payee address; City; State; Zip Code 824 N. Piedras, El Paso, TX 79903
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and beverage for campaign meeting
------------------------	---	---

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
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1 Total pages Schedule F: 4 of 6	2 FILER NAME Getsemani Yañez	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10/10/2012	5 Payee name Justin Leah
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code El Paso, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Recording and Editing of Campaign Audio
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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 10/10/2012	Payee name Rene Leon
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Amount (\$) \$318.75	Payee address; City; State; Zip Code 1015 Prospect #3, El Paso, TX 79902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Candidate Photo Shoot
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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 10/31/12	Payee name Go Direct Mailing Service
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Amount (\$) \$243.27	Payee address; City; State; Zip Code 8400 Boeing Dr. El Paso, TX 79925
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Printing and Mailing of Fundraising Letter
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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 12/12/20	Payee name Clear Chanel Outdoor
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Amount (\$) \$922.50	Payee address; City; State; Zip Code 2305 Sparksman St., El Paso, TX 79903
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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) Production, Printing, and Running of Campaign Advertisement
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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1 Total pages Schedule F: 5 of 6	2 FILER NAME Getsemani Yañez		3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/18/2012	5 Payee name Family Dollar # 336		
6 Amount (\$) \$10.83	7 Payee address; City; State; Zip Code 5120 Montana Ave., El Paso, TX 79903		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) Toy Donation	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/18/2012	Payee name The Garden Restaurant		
Amount (\$) \$56.00	Payee address; City; State; Zip Code 511 Western El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and beverage for campaign meeting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/21/2012	Payee name Super Cocina		
Amount (\$) \$13.47	Payee address; City; State; Zip Code 3530 Dyer St., El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and beverage for campaign meeting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/21/2012	Payee name Lucy's Restaurant		
Amount (\$) \$8.27	Payee address; City; State; Zip Code 4119 N. Mesa El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/ Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food and Beverage for Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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1 Total pages Schedule F: 6 of 6	2 FILER NAME Getsemani Yañez	3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/31/2012	5 Payee name Pic Quick #10 Gas Station		
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 825 Avenida de Mesilla, Las Cruces, NM 88005		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation Expense	(b) Description (If travel outside of Texas, complete Schedule T) Gas Expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date July 1- December 31, 2012	Payee name Pay Pal		
Amount (\$) \$39.55	Payee address; City; State; Zip Code 2223 North First St., San Jose, CA 95131		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/ Banking	Description (If travel outside of Texas, complete Schedule T) Merchant Service Fees	
Complete ONLY 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 EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY 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 EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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