

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2. Total pages filed: <div style="text-align: right; font-size: 24px; font-weight: bold;">7</div>
3 COMMITTEE NAME NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2705 DOUG FORD DR. EL PASO, TX 79935		Date Received <div style="text-align: right; font-size: 18px; font-weight: bold;">2013 JAN - 9 PM 2:42</div> CITY CLERK DEPT.
5 CAMPAIGN TREASURER NAME	MS / MRS / <u>MR</u> FIRST MI OTHON NICKNAME LAST SUFFIX MEDINA	Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2705 DOUG FORD DR. EL PASO, TX 79935		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> change of address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE SAME AS ABOVE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 449-1687		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year OCT / 28 / 2012 THROUGH DEC / 31 / 2012		
11 ELECTION	ELECTION DATE Month Day Year NOV / 6 / 2012	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special	

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

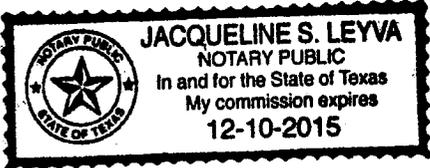
12 COMMITTEE NAME ACCOUNT # (Ethics Commission Filers)
NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE

<p>13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)</p> <p><input type="checkbox"/> SUPPORT (Candidate or Measure)</p> <p><input checked="" type="checkbox"/> OPPOSE (Candidate or Measure)</p> <p><input type="checkbox"/> ASSIST (Officeholder)</p>	<p><input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> OFFICEHOLDER</p> <p><input checked="" type="checkbox"/> MEASURE</p>	<p>CANDIDATE / OFFICEHOLDER NAME</p> <p>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</p> <p>BALLOT IDENTIFICATION / # ELECTION DATE <i>CITY ELECTION BOND</i> Month Day Year <i>PROP #1, 2, 3</i> <i>NOV / 6 / 2012</i></p> <p>DESCRIPTION <i>PROP 1 PARKS, REC. + IMPROVEMENTS</i> <i>PROP 2 MUSEUM, LIBRARY, CULTURAL, ETC. FACILITIES</i> <i>PROP 3 VENUE PROJECT + HOTEL OCCUPANCY TAX</i></p>
---	---	---

2013 JAN -9 PM 2:42
CITY CLERK DEPT.

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED;	\$ 210. ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2770. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 2307. ⁰²
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 462. ⁹⁸
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

15 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Othon Medina Jr., this the 9th day of January, 20 13, to certify which, witness my hand and seal of office.

Jacqueline S. Leyva *Jacqueline S. Leyva* *Notary*

Signature of officer administering oath Printed name of officer administering oath 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	
2 FILER NAME NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/1/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DEBRA F. YOUNG	7 Amount of contribution (\$) 150.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. BOX 2601 GRAPEVINE, TX 76099		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 11/1/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: CARLO DESHOUTEN	Amount of contribution (\$) 60.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4517 R.J. LUJAN EL PASO, TX 79924-6008		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/1/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAUL CRUZ MORENO	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2015 ATLANTA AVE. EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/1/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ANNA L. PEREZ	Amount of contribution (\$) 100.00	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 11/1/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DAVID P. DVORAK	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2509 LAKE CHAMPLAIN ST. EL PASO, TX 79936		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

COUNTY CLERK DEPT.
 11/1/12 9 PM 2:12

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: <u>2</u>	
2 FILER NAME <i>NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/1/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>JAMES A. BRAMBLE</i>	7 Amount of contribution: (\$) <i>100.⁰⁰</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1584 PLAZA CANADA CT. EL PASO, TX 79912</i>		(if travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>11/1/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>LAURA ANN AGUILAR + SAMUEL AGUILAR</i>	Amount of contribution: (\$) <i>100.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>401 CRESTMONT DR, EL PASO, TX 79912</i>		(if travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>11/1/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>BARBARA V. CARRASCO</i>	Amount of contribution: (\$) <i>250.⁰⁰</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>951 VEREDA DEL VALLE AVE. EL PASO, TX 79932</i>		(if travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> 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)	

CITY CLERK DEPT
2012 JAN - 9 PM 2:42

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE C

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C: 1	
2 FILER NAME <i>NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/1/12</i>	5 Corporation / Labor Organization name <i>CITY EMPLOYEES ASSOCIATION OF EL PASO</i> 6 Corporation / Labor Organization address; City; State; Zip Code <i>90 DAVID OCHOA 4431 TROWBRIDGE EL PASO TX 79903</i>	7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)
Date <i>11/5/12</i>	Corporation / Labor Organization name <i>CITY EMPLOYEES ASSOCIATION OF EL PASO</i> Corporation / Labor Organization address; City; State; Zip Code <i>90 DAVID OCHOA 4431 TROWBRIDGE EL PASO, TX 79903</i>	Amount of contribution (\$) <i>1000.00</i>	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)

CITY CLERK DEPT.
2013 JAN - 9
2:42

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: <i>2</i>	2 FILER NAME <i>POLITICAL ACTION NO BONDS FOR BILLIONAIRES- COMMITTEE</i>	3 ACCOUNT # (Ethics Commission Filers)
---------------------------------------	--	--

4 Date <i>11/6/12</i>	5 Payee name <i>FRANK CARILLO</i>
--------------------------	--------------------------------------

6 Amount (\$) <i>200.⁰⁰</i>	7 Payee address; City; State; Zip Code <i>6041 QUAIL AVE. EL PASO, TX 79924</i>
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>SALARIES/WAGES/CONTRACT LABOR</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>CAMPAIGN DOCUMENTATION VIDEO</i>
--------------------------	--	--

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

Date <i>11/6/12</i>	Payee name <i>TEXICO COMMUNICATIONS</i>
------------------------	--

Amount (\$) <i>200.⁰⁰</i>	Payee address; City; State; Zip Code <i>824 BOLIVIA EL PASO, TX 79903</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>MEDIA-RADIO PROGRAMMING</i>
------------------------	--	---

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

Date <i>11/8/12</i>	Payee name <i>EL DIARIO</i>
------------------------	--------------------------------

Amount (\$) <i>504.⁰⁰</i>	Payee address; City; State; Zip Code <i>1801 TEXAS AVE. EL PASO, TX 79901</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>ONE PAGE NEWSPAPER AD</i>
------------------------	--	---

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

Date <i>11/8/12</i>	Payee name <i>HENRY VALDEZ</i>
------------------------	-----------------------------------

Amount (\$) <i>160.⁰⁰</i>	Payee address; City; State; Zip Code <i>9113 TENANGO EL PASO, TX</i>
---	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>SALARIES/WAGES/CONTRACT LABOR</i>	Description (If travel outside of Texas, complete Schedule T) <i>ELECTIONEERING</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

2013 JAN -9 PM 2:42
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	2 FILER NAME NO BONDS FOR BILLIONAIRES-POLITICAL ACTION COMMITTEE	3 ACCOUNT # (Ethics Commission Filers)
---------------------------------------	---	---

4 Date 11/8/12	5 Payee name FRANK CARILLO
--------------------------	--------------------------------------

6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 6041 QUAIL EL PASO, TX 79924
--------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) SALARIES/WAGES/CONTRACT LABOR	(b) Description (If travel outside of Texas, complete Schedule T) CAMPAIGN DOCUMENTATION VIDEO
---------------------------------	---	---

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

Date 11/5/12	Payee name ZIPPY PRINTING CENTER
-----------------	-------------------------------------

Amount (\$) 100.00	Payee address; City; State; Zip Code 2855 PERSHING EL PASO, TX 79903-2423
-----------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) PRINTING EXPENSE	Description: (If travel outside of Texas, complete Schedule T) CAMPAIGN LITERATURE
------------------------	--	---

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

Date 11/5/12	Payee name BLUE ROOTS STRATEGIES
-----------------	-------------------------------------

Amount (\$) 909.60	Payee address; City; State; Zip Code P.O. BOX 300053 AUSTIN, TX 78703
-----------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description: (If travel outside of Texas, complete Schedule T) MARKETING ROBO-CALLS
------------------------	---	--

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

Date 11/6/12	Payee name SUBWAY SANDWICHES + SALADS
-----------------	--

Amount (\$) 133.42	Payee address; City; State; Zip Code 3333 N. YARBROUGH EL PASO, TX 79925
-----------------------	---

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 ELECTION VOLUNTEERS + WORKERS
------------------------	---	---

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

2013 JAN 9 PM 2:42 CITY CLERK DEPT.