

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Apodaca, Michael

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

CITY CLERK DEPT.
2013 APR 11 PM 4:58

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 75.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 8,660.27

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 3,490.39

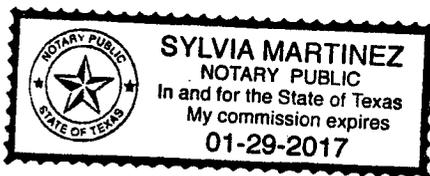
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 4,709.57

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 500.00

17 AFFIDAVIT



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

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Keny Michael Apodaca, this the 11th day of April, 2013, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Sylvia Martinez
Print 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 PAGE # Schedule: 1/11 Report: 3/27	
2 FILER NAME Apodaca, Michael		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/20/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvarenga, Jesse 6 Contributor address; City; State; Zip Code 4214 Marian St La Mesa, CA 91941	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) CITY CLERK DEPT 2013 APR 11 PM 4:00 <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Sales		10 Employer (See Instructions) FedEx	
Date 02/05/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Apodaca, Gloria Contributor address; City; State; Zip Code 3323 Sacramento El Paso, TX 79930	Amount of contribution (\$) \$110.00	In-kind contribution description (if applicable) Donation for Banner and Business cards <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Realtor/Loan Officer		Employer (See Instructions) Marquis Realty	
Date 02/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armijo, Guadalupe Contributor address; City; State; Zip Code 8901 Turrentine El Paso, tx 79925	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 03/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bankston, Susan Contributor address; City; State; Zip Code 1703 Magnolia Lane RICHMOND, TX 77469	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 02/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bramer, Aaron Contributor address; City; State; Zip Code 6008 Redstone Ln El Paso, TX 79924	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) Not employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 5/27	
2 FILER NAME Apodaca, Michael		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 03/13/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavez, Connie and Norman 6 Contributor address; City; State; Zip Code 824 Bolivia St El Paso, TX 79903	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) Retired	
Date 01/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contreras, Erica Contributor address; City; State; Zip Code 2646 Bering Dr. Houston, TX 77057	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Trainer/VP		Employer (See Instructions) Wells Fargo Bank	
Date 03/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cuevas, Nancy Contributor address; City; State; Zip Code 2437 W. Iris Ave McAllen, TX 78501	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Office Manager/Bookkeeper		Employer (See Instructions) Action Realty Property Mangement	
Date 01/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doucette, Susan Contributor address; City; State; Zip Code 7124 Portugal Drive El Paso, TX 79912	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Hunt Building Company Ltd.	
Date 02/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duarte, Dan and Carmen Contributor address; City; State; Zip Code 4515 Bonds Ct. El Paso, tx 79903	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

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 CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/11 Report: 7/2	
2 FILER NAME Apodaca, Michael		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 03/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerra, Terrysa 6 Contributor address; City; State; Zip Code 3200 South 1st St #1011 Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Campaign Manager		10 Employer (See Instructions) Sylvia Garcia for Senate	
Date 02/05/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gutierrez, Anna Contributor address; City; State; Zip Code 5928 Winterham Way Sacramento, CA 95823	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Autopsy Coordinator		Employer (See Instructions) University of California Davis Health System	
Date 04/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gutierrez, Rosario Contributor address; City; State; Zip Code 22 Meadow Lane Redwood City, CA 94063	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 02/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Sandra Contributor address; City; State; Zip Code 2606 Jefferson El Paso, tx 79930	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) High, Marshall Contributor address; City; State; Zip Code 2713 Sherman Ave NW Washington, DC 20001	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) Not employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/11 Report: 8/27	
2 FILER NAME Apodaca, Michael		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/02/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husmann, Kristie 6 Contributor address; City; State; Zip Code 4901 Beech St. Bellaire, TX 77401	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Volunteer work only		10 Employer (See Instructions) Retired	
Date 02/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lopez, Pasty Contributor address; City; State; Zip Code 14168 Spanish Point El Paso, tx 79938	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) El Paso County Attorneys Office	
Date 02/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luckey, Mary Contributor address; City; State; Zip Code 5431 Indigo St Houston, TX 77096	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Government Employee		Employer (See Instructions) NASA Johnson Space Center	
Date 04/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Magid, Linda Contributor address; City; State; Zip Code 18606 Eagle Ford San Antonio, TX 78258	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self	
Date 03/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marquez, Sabino Contributor address; City; State; Zip Code 1473 Lee Trevino El Paso, tx 79936	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Marquis Lending	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/11 Report: 13/27	
2 FILER NAME Apodaca, Michael		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/01/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vogt, Ruben 6 Contributor address; City; State; Zip Code 123 Campos St Canutillo, TX 79835	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Store Manger		10 Employer (See Instructions) Circle K	
Date 04/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vogt, Ruben John Contributor address; City; State; Zip Code 6301 Jebel Way El Paso, TX 79912	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Public Policy		Employer (See Instructions) County of El Paso	
Date 02/03/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Ruth Contributor address; City; State; Zip Code 3301 Rain Dance Drive El Paso, TX 79936	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Retired	
Date 02/07/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winterberg, Jacqueline Contributor address; City; State; Zip Code 1473 Lee Trevino El Paso, tx 79936	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Self	

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CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/14 Report: 14/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 00000001
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4 Date 03/15/2013	5 Payee name Applebees
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6 Amount (\$) \$33.65	7 Payee address City; State; Zip Code 4700 Woodrow Bean El Paso, TX 79924
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteer meeting
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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 02/07/2013	Payee name Big Lots
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Amount (\$) \$27.06	Payee address City; State; Zip Code 8500 Dyer El Paso, TX 79904
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for blockwalk
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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 02/13/2013	Payee name Black El Paso Democrats
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Amount (\$) \$250.00	Payee address City; State; Zip Code P.O. Box 371425 El Paso, TX 79937
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> tickets for BEPD Banquet
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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 02/13/2013	Payee name Cadre Media, LLC
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Amount (\$) \$200.00	Payee address City; State; Zip Code 1108 Lavaca, Ste 100 #458 Austin, TX 78701
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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) <input type="checkbox"/> video for website
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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CITY CLERK DEPT.
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/14 Report: 15/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 00000001
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4 Date 02/26/2013	5 Payee name City of El Paso
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 1 Civic Center Plaza El Paso, TX 79901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candidate filing 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 02/06/2013	Payee name Facebook
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Amount (\$) \$1.37	Payee address City; State; Zip Code 1601 S California Ave Palo Alto, CA 94304
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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) <input type="checkbox"/> ad for fundraiser
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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 02/20/2013	Payee name Facebook
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Amount (\$) \$4.97	Payee address City; State; Zip Code 1601 S California Ave Palo Alto, CA 94304
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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) <input type="checkbox"/> Advertisement for 60 day of action event
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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 03/15/2013	Payee name Facebook
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Amount (\$) \$5.00	Payee address City; State; Zip Code 1601 S California Ave Palo Alto, CA 94304
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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) <input type="checkbox"/> ad for phonebank
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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CITY CLERK DEPT.
2013 APR 11 PM 4:55

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/14 Report: 16/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC Filers) 0000000
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4 Date 02/06/2013	5 Payee name Five Points Bistro
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6 Amount (\$) \$413.03	7 Payee address City; State; Zip Code 3019 Montana El Paso, TX 79930
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Food for Fundraiser
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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 03/26/2013	Payee name Lowe's
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Amount (\$) \$12.50	Payee address City; State; Zip Code 11950 Rojas Dr El Paso, TX 79936
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for yard signs
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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 02/20/2013	Payee name Melendez, Gumaro
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Amount (\$) \$125.00	Payee address City; State; Zip Code 3723 Harrison Ave El Paso, TX 79930
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> payment for website development
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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 03/07/2013	Payee name Moutain Star FCU
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Amount (\$) \$0.75	Payee address City; State; Zip Code 2229 E Yandell Dr El Paso, TX 79903
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> bank fee for money order
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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CITY CLERK DEPT.
APR 11 PM 4:59

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

CITY CLERK DEPT
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1 PAGE # Schedule: 4/14 Report: 17/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 0000000
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4 Date 03/13/2013	5 Payee name Moutain Star FCU
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6 Amount (\$) \$0.07	7 Payee address City; State; Zip Code 2229 E Yandell Dr El Paso, TX 79903
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> bank 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 01/29/2013	Payee name Office Depot
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Amount (\$) \$109.85	Payee address City; State; Zip Code 1111 Geronimo El Paso, TX 79903
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for fundraiser
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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 02/04/2013	Payee name Office Depot
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Amount (\$) \$58.61	Payee address City; State; Zip Code 1313 George Diter El Paso, TX 79903
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for fundraiser
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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 02/15/2013	Payee name Office Depot
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Amount (\$) \$18.43	Payee address City; State; Zip Code 1313 George Diter El Paso, TX 79936
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for phonebank
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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 CITY OF EL PASO
 CLERK DEPT.

1 PAGE # Schedule: 5/14 Report: 18/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 0000000
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4 Date 02/18/2013	5 Payee name Office Depot
6 Amount (\$) \$69.79	7 Payee address City; State; Zip Code 1111 Geronimo El Paso, TX 79903

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stamps and supplies for blockwalk
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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 03/06/2013	Payee name Office Depot
Amount (\$) \$67.63	Payee address City; State; Zip Code 1313 George Diter El Paso, TX 79903

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for blockwalk and stamps
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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 03/15/2013	Payee name Office Depot
Amount (\$) \$14.48	Payee address City; State; Zip Code 1313 George Diter El Paso, TX 79936

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for blockwalk
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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 01/08/2013	Payee name Piryx Inc
Amount (\$) \$1.13	Payee address City; State; Zip Code 144 2nd St San Francisco, CA 94105

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel in District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/14 Report: 19/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 00000001
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4 Date 01/09/2013	5 Payee name Piryx Inc
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6 Amount (\$) \$1.13	7 Payee address City; State; Zip Code 145 2nd St San Francisco, CA 94106
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card 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 01/10/2013	Payee name Piryx Inc
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Amount (\$) \$4.50	Payee address City; State; Zip Code 146 2nd St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee
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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 01/15/2013	Payee name Piryx Inc
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Amount (\$) \$2.25	Payee address City; State; Zip Code 147 2nd St San Francisco, CA 94108
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee
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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 01/17/2013	Payee name Piryx Inc
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Amount (\$) \$1.13	Payee address City; State; Zip Code 148 2nd St San Francisco, CA 94109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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CITY CLERK DEPT.
2013 APR 1 PM 4:59

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/14 Report: 20/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # (TEC filers) 0000000	
4 Date 02/02/2013	5 Payee name Piryx Inc		CITY CLERK DEPT. 2013 APR 11 PM 1:59		
6 Amount (\$) \$1.13	7 Payee address City; State; Zip Code 149 2nd St San Francisco, CA 94110				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/03/2013	Payee name Piryx Inc				
Amount (\$) \$6.75	Payee address City; State; Zip Code 150 2nd St San Francisco, CA 94111				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/05/2013	Payee name Piryx Inc				
Amount (\$) \$9.00	Payee address City; State; Zip Code 153 2nd St San Francisco, CA 94114				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/05/2013	Payee name Piryx Inc				
Amount (\$) \$0.68	Payee address City; State; Zip Code 151 2nd St San Francisco, CA 94112				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/14 Report: 21/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # (TEC filers) 00000000	
4 Date 02/05/2013	5 Payee name Piryx Inc				
6 Amount (\$) \$4.50	7 Payee address City; State; Zip Code 152 2nd St San Francisco, CA 94113				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/06/2013	Payee name Piryx Inc				
Amount (\$) \$2.25	Payee address City; State; Zip Code 155 2nd St San Francisco, CA 94116				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/06/2013	Payee name Piryx Inc				
Amount (\$) \$2.25	Payee address City; State; Zip Code 154 2nd St San Francisco, CA 94115				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/10/2013	Payee name Piryx Inc				
Amount (\$) \$2.25	Payee address City; State; Zip Code 156 2nd St San Francisco, CA 94117				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/14 Report: 22/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # (TEC filers) 00000001	
4 Date 02/11/2013	5 Payee name Piryx Inc				
6 Amount (\$) \$2.25	7 Payee address City; State; Zip Code 157 2nd St San Francisco, CA 94118				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/16/2013	Payee name Piryx Inc				
Amount (\$) \$4.50	Payee address City; State; Zip Code 158 2nd St San Francisco, CA 94119				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/20/2013	Payee name Piryx Inc				
Amount (\$) \$4.50	Payee address City; State; Zip Code 159 2nd St San Francisco, CA 94120				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/21/2013	Payee name Piryx Inc				
Amount (\$) \$1.13	Payee address City; State; Zip Code 160 2nd St San Francisco, CA 94121				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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 CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/14 Report: 23/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # (TEC filers) 0000000	
4 Date 02/22/2013	5 Payee name Piryx Inc				
6 Amount (\$) \$22.50	7 Payee address City; State; Zip Code 161 2nd St San Francisco, CA 94122				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/01/2013	Payee name Piryx Inc				
Amount (\$) \$0.45	Payee address City; State; Zip Code 162 2nd St San Francisco, CA 94123				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/05/2013	Payee name Piryx Inc				
Amount (\$) \$4.50	Payee address City; State; Zip Code 163 2nd St San Francisco, CA 94124				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/13/2013	Payee name Piryx Inc				
Amount (\$) \$0.69	Payee address City; State; Zip Code 164 2nd St San Francisco, CA 94125				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fee		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

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 CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 11/14 Report: 24/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # (TEC filers) 00000009	
4 Date 03/18/2013		5 Payee name Piryx Inc			
6 Amount (\$) \$4.50		7 Payee address City; State; Zip Code 165 2nd St San Francisco, CA 94126			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/27/2013		Payee name Piryx Inc			
Amount (\$) \$1.13		Payee address City; State; Zip Code 166 2nd St San Francisco, CA 94127			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/27/2013		Payee name Piryx Inc			
Amount (\$) \$1.13		Payee address City; State; Zip Code 167 2nd St San Francisco, CA 94128			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/28/2013		Payee name Piryx Inc			
Amount (\$) \$0.68		Payee address City; State; Zip Code 168 2nd St San Francisco, CA 94129			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) Credit Card Fee <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:

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 CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial 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.

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1 PAGE # Schedule: 12/14 Report: 25/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT # (TEC filers) 00000099
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4 Date 04/01/2013	5 Payee name Piryx Inc
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6 Amount (\$) \$0.68	7 Payee address City; State; Zip Code 169 2nd St San Francisco, CA 94130
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card 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 02/22/2013	Payee name Print it Marketing
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Amount (\$) \$811.88	Payee address City; State; Zip Code 3239 N. Zaragoza El Paso, TX 79938
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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) <input type="checkbox"/> payment for yard sign printing
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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 03/07/2013	Payee name Print it Marketing
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Amount (\$) \$215.50	Payee address City; State; Zip Code 3239 N. Zaragoza Ste C El Paso, TX 79938
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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) <input type="checkbox"/> payment for new door hangers
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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 03/13/2013	Payee name Print it Marketing
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Amount (\$) \$215.50	Payee address City; State; Zip Code 3239 N. Zaragoza El Paso, TX 79938
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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) <input type="checkbox"/> payment for door hangers
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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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/14 Report: 26/27		2 FILER NAME Apodaca, Michael		3 ACCOUNT # 00000001	
4 Date 02/26/2013	5 Payee name Sam's Club				
6 Amount (\$) \$70.92	7 Payee address City; State; Zip Code 6502 Rojas El Paso, TX 79936				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for Meet and Greet meeting		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/01/2013	Payee name Texas Democratic Party				
Amount (\$) \$125.00	Payee address City; State; Zip Code 4818 East Ben White Ste 104 Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payment for Voter File		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 02/12/2013	Payee name United States Postal Service				
Amount (\$) \$92.00	Payee address City; State; Zip Code 7314 Gateway East El Paso, TX 79915				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stamps		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 03/11/2013	Payee name Voter Activation Network				
Amount (\$) \$113.00	Payee address City; State; Zip Code 48 Grove Street, Suite 202 Somerville, MA 02144				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> payment for predictive dialer services		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

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 CITY CLERK DEP.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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1 PAGE # Schedule: 14/14 Report: 27/27	2 FILER NAME Apodaca, Michael	3 ACCOUNT# (TEC filers) 00000001
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4 Date 03/26/2013	5 Payee name Voter Activation Network
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6 Amount (\$) \$60.00	7 Payee address City; State; Zip Code 48 Grove Street, Suite 202 Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> payment for predictive dialer services
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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 02/01/2013	Payee name Wal Mart
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Amount (\$) \$21.75	Payee address City; State; Zip Code 5631 Dyer El Paso, TX 79930
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies for Blockwalk
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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 03/01/2013	Payee name Wal Mart
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Amount (\$) \$15.06	Payee address City; State; Zip Code 5631 Dyer El Paso, TX 79930
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> water for blockwalk event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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