

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 55
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <u>MR</u> FIRST MI OSCAR NICKNAME LAST SUFFIX LEESER	OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1017 QUINTA ANTIGUA EL PASO, TEXAS 79912		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 373-1234		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI CHRISTINA NICKNAME LAST SUFFIX ACOSTA		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4327 ELGIN EL PASO, TEXAS 79907		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 433-1647		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 5 / 2 / 2013 6 / 5 / 2013		
11 ELECTION	ELECTION DATE Month Day Year 6 / 15 / 2013	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) MAYOR	

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2013 JUN 11 PM 5:10

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME OSCAR LEESER	15 ACCOUNT # (Ethics Commission Filers)
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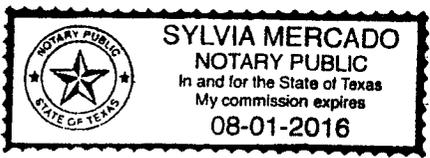
16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
	COMMITTEE ADDRESS		
	COMMITTEE CAMPAIGN TREASURER NAME		
COMMITTEE CAMPAIGN TREASURER ADDRESS			

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 2013 JUN 11 PM 5:10

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)	\$ 130,434.94
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 135,576.60
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 17,345.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 89,484.31

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.



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Oscar Leeser, this the 7th day of June, 20 13, to certify which, witness my hand and seal of office.

Sylvia Mercado
Signature of officer administering oath

Sylvia Mercado
Printed name of officer administering oath

secretary
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: **39**

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **3/26/2013** 5 Full name of contributor out-of-state PAC (ID#: _____) **STEVEN M. OROZCO** 7 Amount of contribution (\$) **\$30.00** 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code **2708 GENE LITTLER DR.
EL PASO, TEXAS 79936**
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date **4/10/2013** Full name of contributor out-of-state PAC (ID#: _____) **LINDSAY B. HOLT** Amount of contribution (\$) **\$1,000.00** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **5555 WESTSIDE DR.
EL PASO, TEXAS 79932**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **4/23/2013** Full name of contributor out-of-state PAC (ID#: _____) **ANNIE McALMON ZIMMERMAN** Amount of contribution (\$) **\$100.00** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **408 BLACKER AVE.
EL PASO, TX 79902**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **4/25/2013** Full name of contributor out-of-state PAC (ID#: _____) **TRAVIS R. CRAWFORD** Amount of contribution (\$) **\$500.00** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **1123 CALLE PARQUE DR.
EL PASO, TEXAS 79912**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **4/25/2013** Full name of contributor out-of-state PAC (ID#: _____) **ELIZABETH H. McALMON** Amount of contribution (\$) **\$500.00** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **1800 N. STANTON ST. #507
EL PASO, TEXAS 79902**
(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.

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2013 JUN 11 PM 5:10

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME
OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date
✓ 4/26/2013

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

6 Contributor address; City; State; Zip Code
**5472 CALLE DEL SOL
EL PASO, TEXAS 79912**

7 Amount of contribution (\$) **\$ 300.⁰⁰**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

4 Date
✓ 4/26/2013

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

Contributor address; City; State; Zip Code
**4625 RIPLEY
EL PASO, TEXAS 79922**

Amount of contribution (\$) **\$1,000.⁰⁰**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

4 Date
✓ 4/26/2013

Full name of contributor out-of-state PAC (ID#: _____)
ANTHONY W. BAIRD

Contributor address; City; State; Zip Code
**4940 PIKES PEAK
EL PASO, TEXAS 79904**

Amount of contribution (\$) **\$100.⁰⁰**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

4 Date
✓ 4/26/2013

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

Contributor address; City; State; Zip Code
**P.O. BOX 55
EL PASO, TEXAS 79940**

Amount of contribution (\$) **\$ 500.⁰⁰**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

4 Date
✓ 4/26/2013

Full name of contributor out-of-state PAC (ID#: _____)
MR. & MRS. HARRIS HATFIELD

Contributor address; City; State; Zip Code
**1039 LOS JARDINES CIR.
EL PASO, TEXAS 79912**

Amount of contribution (\$) **\$100.⁰⁰**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 4/26/2013

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

RICHARD M. KAUFMAN

6 Contributor address; City; State; Zip Code

6033 TORREY PINES
EL PASO, TEXAS 79912

7 Amount of contribution (\$)

\$200.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 4/29/2013

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

GARY R. HEDRICK

Contributor address; City; State; Zip Code

328 CRIMSON CLOUD LN.
EL PASO, TEXAS 79912

Amount of contribution (\$)

\$1,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/1/2013

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

DON K. RUSSELL

Contributor address; City; State; Zip Code

440 COUNTRY OAKS DR.
EL PASO, TEXAS 79932

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/1/2013

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

BERNARD J. STAPONAVICH

Contributor address; City; State; Zip Code

10901 TOM WEISKOPF D
EL PASO, TEXAS 79936

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/1/2013

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

RANDY JOHNSON

Contributor address; City; State; Zip Code

5860 N. MESA
EL PASO, TEXAS 79912

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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2013 JUN 11 PM 5:10

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/2/2013

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

NICOLAS M. ROSA

7 Amount of contribution (\$)

\$ 50.⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3524 SHEPPARD
EL PASO, TEXAS 79904

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/3/2013

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

LISA MCALMON BROWN

Amount of contribution (\$)

\$ 200.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5828 VISTA CORONA CT.
EL PASO, TEXAS 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/3/2013

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

RICHARD E. GLANCEY

Amount of contribution (\$)

\$ 125.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. BOX 221546
EL PASO, TEXAS 79913

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/6/2013

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

BILL TERRELL

Amount of contribution (\$)

\$ 1,000.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

34 CIELD VISTA
ANTHONY, NM 88021

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/6/2013

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

ALLAN SHARPE

Amount of contribution (\$)

\$ 250.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6012 ALCALA CT.
EL PASO, TEXAS 79932

(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.

2013 JUN 11 PM 5:10
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **5/6/2013** 5 Full name of contributor out-of-state PAC (ID#: _____) **LAWRENCE MADRID** 7 Amount of contribution (\$) **\$50.⁰⁰** 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
**6720 BRISA DEL MAR
EL PASO, TEXAS 79912**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

5/6/2013 GREG MALOOLY
Contributor address; City; State; Zip Code
**6006 TORREY PINES DR.
EL PASO, TEXAS 79912**

Amount of contribution (\$) **\$500.⁰⁰**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

5/6/2013 RANDY KUYKENDALL
Contributor address; City; State; Zip Code
**10225 BUCKWOOD
EL PASO, TEXAS 79925**

Amount of contribution (\$) **\$1,000.⁰⁰**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

5/6/2013 MARY CANO
Contributor address; City; State; Zip Code
**3025 TAYLOR
EL PASO, TEXAS 79930**

Amount of contribution (\$) **\$100.⁰⁰**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

5/7/2013 MARCEL & ELVIRA BOURGON
Contributor address; City; State; Zip Code
**110 CASAS BELLA LANE
SANTA TERESA, NM 88008**

Amount of contribution (\$) **\$200.⁰⁰**

(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.

CITY CLERK DEPT.
2013 JUN 1
PM 5:10

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date ✓ 5/7/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOUIE RICO	7 Amount of contribution (\$) \$100.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
✓ 5/7/2013	JACKIE MATA Contributor address; City; State; Zip Code	\$500. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/7/2013	JOHN C. MARTIN Contributor address; City; State; Zip Code 609 MT. CRISTO REY EL PASO, TEXAS 79922	\$250. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/7/2013	JORGE HERRERA Contributor address; City; State; Zip Code 491 N. RESLER DR. STE. F. EL PASO, TEXAS 79912	\$300. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/7/2013	YAKUP OZCELIK Contributor address; City; State; Zip Code 2401 LAKEVIEW RD. APT. 917 NORTH LITTLE ROCK, AR 72116	\$75. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

2013 JUN 11 PM 5:10
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **5/8/2013** 5 Full name of contributor out-of-state PAC (ID#: _____) **FRANK CORRAL** 7 Amount of contribution (\$) **\$100.⁰⁰** 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
**13400 EMERALD POND
EL PASO, TEXAS 79928**
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date **5/8/2013** Full name of contributor out-of-state PAC (ID#: _____) **JORGE GRAJEDA** Amount of contribution (\$) **\$100.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**525 FLANAGAN
EL PASO, TEXAS 79928**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/8/2013** Full name of contributor out-of-state PAC (ID#: _____) **HAKAN SIMSEK** Amount of contribution (\$) **\$75.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**1808 HIDDEN BROOK
GRAND PRAIRIE, TEXAS 75050**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/9/2013** Full name of contributor out-of-state PAC (ID#: _____) **FREDERICK R. HOFFMAN** Amount of contribution (\$) **\$25.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**5113 N. MESA ST. APT. B302
EL PASO, TEXAS 79912**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/8/2013** Full name of contributor out-of-state PAC (ID#: _____) **RENE O. CASAVANTES** Amount of contribution (\$) **\$1,000.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**615 E. SCHUSTER
EL PASO, TEXAS 79902**
(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.

2013 JUN 11 PM 5:11
CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/8/2013

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

JEFFREY B. KECKLEY

6 Contributor address; City; State; Zip Code

1221 CERRITO ALEGRE
EL PASO, TX 79912

7 Amount of contribution (\$)

\$1,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/8/2013

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

ROBERT A. OLIVARES

Contributor address; City; State; Zip Code

5913 QUINTA REAL CT.
EL PASO, TX 79912

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/9/2013

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

MICHAEL JACOBS

Contributor address; City; State; Zip Code

6561 MAJESTIC RIDGE DR.
EL PASO, TEXAS 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/9/2013

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

SAUL FRANK

Contributor address; City; State; Zip Code

620 CAMINO REAL AVE.
EL PASO, TEXAS 79922

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/9/2013

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

JOYCE E. CHAVEZ

Contributor address; City; State; Zip Code

1912 PASEO REAL CIR.
EL PASO, TEXAS 79936

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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JUN 11 PM 5:11

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/9/2013

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

PATRICIA MARTINEZ GUZMAN

6 Contributor address; City; State; Zip Code

2120 ESCARPA DR.
EL PASO, TEXAS 79935

7 Amount of contribution (\$)

\$500.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/12/2013

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

R A ROSEN

Contributor address; City; State; Zip Code

3808 85th St.
LUBBOCK, TEXAS 79423

Amount of contribution (\$)

\$150.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

TRAVIS R. CRAWFORD

Contributor address; City; State; Zip Code

6800 MONTANA AVE.
EL PASO, TEXAS 79925

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

CASSIE J. HOLMAN

Contributor address; City; State; Zip Code

P.O. BOX 345
CANUTILLO, TEXAS 79835

Amount of contribution (\$)

\$800.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

GEORGE E. SALOM JR.

Contributor address; City; State; Zip Code

510 BLACKER AVE.
EL PASO, TEXAS 79902

Amount of contribution (\$)

\$2,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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2013 JUN 11 PM 5:11

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **5/13/2013** 5 Full name of contributor out-of-state PAC (ID#: _____) **GEORGE SALOM, JR.** 7 Amount of contribution (\$) **\$500.⁰⁰** 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code **807 S. EL PASO ST.
EL PASO, TEXAS 79901**
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date **5/13/2013** Full name of contributor out-of-state PAC (ID#: _____) **LOREN H. HODGES** Amount of contribution (\$) **\$1,000.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **401 VALPLANO
EL PASO, TEXAS 79912**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/13/2013** Full name of contributor out-of-state PAC (ID#: _____) **DUSTY HENSON** Amount of contribution (\$) **\$1,000.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **6926 GATEWAY EAST
EL PASO, TEXAS 79915**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/13/2013** Full name of contributor out-of-state PAC (ID#: _____) **DWAIN L. JOHNSON JR.** Amount of contribution (\$) **\$50.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **3137 VOGUE
EL PASO, TEXAS 79935**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **5/13/2013** Full name of contributor out-of-state PAC (ID#: _____) **STEVE RASH** Amount of contribution (\$) **\$250.⁰⁰** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code **5304 CORY LN.
EL PASO, TEXAS 79932**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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

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JUN 11 PM 5:11

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date ✓ 5/14/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMETRIO M. JIMENEZ 6 Contributor address; City; State; Zip Code 442 COUNTRY OAKS EL PASO, TEXAS 79932	7 Amount of contribution (\$) \$1,000.⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
✓ 5/14/2013	PHIL HIGHFILL Contributor address; City; State; Zip Code 3212 MESA VERDE LN. EL PASO, TEXAS 79904	\$500.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/14/2013	KELLY M. SORENSON Contributor address; City; State; Zip Code 11708 VALOR COURT EL PASO, TEXAS 79936	\$1,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/14/2013	KENNETH WADE Contributor address; City; State; Zip Code 4200 LOMA DIAMANTE EL PASO, TEXAS 79934	\$500.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/14/2013	NAHEB KHOURI Contributor address; City; State; Zip Code 6616 LOS ALTOS EL PASO, TEXAS 79912	\$500.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date ✓ 5/14/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES M. SPEER	7 Amount of contribution (\$) \$ 200. ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 300 E. MAIN STE. 1032 EL PASO, TEXAS 79901		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date ✓ 5/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY PASCHICH	Amount of contribution (\$) \$ 2,000. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 661 ROSINANTE RD. EL PASO, TEXAS 79922		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/14/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBEN ORTIZ	Amount of contribution (\$) \$ 1,000. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1141 E. RIO GRANDE EL PASO, TEXAS 79902		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT PINEDA	Amount of contribution (\$) \$ 250. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9201 MONTANA EL PASO, TEXAS 79925		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCISCO ARROYOS III	Amount of contribution (\$) \$ 1,000. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11996 PASEO DEL REY EL PASO, TEXAS 79936		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/15/2013

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

ROBERT SKIPWORTH

7 Amount of contribution (\$)

\$100.⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

310 N. MESA STE 600
EL PASO, TEXAS 79901

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/15/2013

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

MICHAEL LUDEMAN

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6472 CALLE DEL SOL
EL PASO, TEXAS 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/15/2013

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

EPM PO ASSOC, PAC

Amount of contribution (\$)

\$5,000.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

747 E. SAN ANTONIO, STE. 103
EL PASO, TEXAS 79901

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/15/2013

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

JIM CARDWELL

Amount of contribution (\$)

\$5,000.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5772 DIAMOND POINT CIR.
EL PASO, TEXAS 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/15/2013

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

DEAN INNISS

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7345 LUZ DE VILLA CT.
EL PASO, TEXAS 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/15/2013

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

YVONNE STEVENS

6 Contributor address; City; State; Zip Code

945 VIA MONTE ST.
EL PASO, TEXAS 79912

7 Amount of contribution (\$)

\$200.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/16/2013

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

DAVID FULLER

Contributor address; City; State; Zip Code

4021 HERCULES
EL PASO, TX 79904

Amount of contribution (\$)

\$2,500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/16/2013

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

ED SOTO

Contributor address; City; State; Zip Code

515 S. KANSAS ST.
EL PASO, TX 79901

Amount of contribution (\$)

\$2,500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/16/2013

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

LINDSAY B. HOLT

Contributor address; City; State; Zip Code

5555 WESTSIDE DR.
EL PASO, TEXAS 79932

Amount of contribution (\$)

\$1,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/16/2013

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

SYLVIA SANDOVAL

Contributor address; City; State; Zip Code

10900 LOMA DE COLOR
EL PASO, TEXAS 79934

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/18/2013

5 Full name of contributor

out-of-state PAC (ID#: _____)

ELIZABETH BRANHAM

6 Contributor address; City; State; Zip Code

10725 VISTA LOMAS
EL PASO, TX 79935

7 Amount of contribution (\$)

\$25.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/18/2013

Full name of contributor

out-of-state PAC (ID#: _____)

ELIZABETH H. MCALMON

Contributor address; City; State; Zip Code

1800 N. STANTON # 507
EL PASO, TX 79902

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/19/2013

Full name of contributor

out-of-state PAC (ID#: _____)

SCOTT BLUMENFELD

Contributor address; City; State; Zip Code

708 WALTHAM COURT
EL PASO, TEXAS 79922

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/19/2013

Full name of contributor

out-of-state PAC (ID#: _____)

R.J. BLUMENFELD

Contributor address; City; State; Zip Code

6103 PINEHURST
EL PASO, TEXAS 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/19/2013

Full name of contributor

out-of-state PAC (ID#: _____)

DANIEL BLUMENFELD

Contributor address; City; State; Zip Code

817 RIVER OAKS
EL PASO, TX 79912

Amount of contribution (\$)

\$75.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date ✓ 5/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAM STEELE 6 Contributor address; City; State; Zip Code 6598 EAGLE RIDGE EL PASO, TEXAS 79912	7 Amount of contribution (\$) \$100.⁰⁰	8 In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date ✓ 5/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHOBERTA LEESER Contributor address; City; State; Zip Code 7465 PLAZA TAURINA EL PASO, TX 79912	Amount of contribution (\$) \$200.⁰⁰	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSHERIFF'S OFFICERS ASSOC. PAC Contributor address; City; State; Zip Code 747 E. SAN ANTONIO NO.103 EL PASO, TX 79901	Amount of contribution (\$) \$3,000.⁰⁰	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOUELLA J. KEGERREIS Contributor address; City; State; Zip Code 1816 TOM BOLT DR. EL PASO, TX 79936	Amount of contribution (\$) \$100.⁰⁰	In-kind contribution description (if applicable)
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERT L. BLUMENFELD Contributor address; City; State; Zip Code 6440 CALLE VISTA EL PASO, TX 79912	Amount of contribution (\$) \$200.⁰⁰	In-kind contribution description (if applicable)
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(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.

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:

2 FILER NAME **OSCAR LEESER** 3 ACCOUNT # (Ethics Commission Filers)

4 Date ✓ 5/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ENRIQUE N. MEDRANO	7 Amount of contribution (\$) \$ 25. ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 10209 LUELLA EL PASO, TEXAS 79925		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date ✓ 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMES R. REY	Amount of contribution (\$) \$ 1,000. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 501 N. KANSAS STE. 100 EL PASO, TX 79901		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DAVID TOKOPH	Amount of contribution (\$) \$ 2,500. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 721 CERVANTES COURT EL PASO, TX 79922		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAYVANT DESAI	Amount of contribution (\$) \$ 200. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7174 ALAMEDA AVE. EL PASO, TX 79915		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date ✓ 5/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARY TOKOPH	Amount of contribution (\$) \$ 2,500. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 721 CERVANTES COURT EL PASO, TX 79922		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/21/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALD C. LUCIANO	7 Amount of contribution (\$) \$ 300.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 718 BLACKER EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
5/22/2013	DAN DAWES Contributor address; City; State; Zip Code EL PASO, TX 79901	\$25. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/22/2013	ETTA MAE SCHERR Contributor address; City; State; Zip Code 744 GOMEZ RD. EL PASO, TX 79932	\$500. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/22/2013	BETTY D. BOGGS Contributor address; City; State; Zip Code 910 KE REDD RD. # 531 EL PASO, TX 79912	\$100. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
5/22/2013	ENRIQUE CASTRO Contributor address; City; State; Zip Code 8621 NORTH LOOP EL PASO, TX 79907	\$500. ⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/23/2013

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

THOMAS G. WICKER JR.

6 Contributor address; City; State; Zip Code

6533 CALLE BONITA LW.
EL PASO, TX 79912

7 Amount of contribution (\$)

\$100.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/23/2013

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

RAYMOND N. MALOOLY

Contributor address; City; State; Zip Code

804 CHERRY HILL
EL PASO, TX 79912

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/23/2013

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

MENDEL BLUMENFELD

Contributor address; City; State; Zip Code

5809 ACACIA CIR.
EL PASO, TX 79912

Amount of contribution (\$)

\$125.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/22/2013

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

CARL WRIGHT

Contributor address; City; State; Zip Code

8715 MAGNETIC
EL PASO, TX 79904

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/23/2013

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

GORDON E. WELCH

Contributor address; City; State; Zip Code

P.O. BOX 220927
EL PASO, TX 79913

Amount of contribution (\$)

\$1,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME
OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date: **5/24/2013**
5 Full name of contributor: **USA R. HARTMAN**
6 Contributor address; City; State; Zip Code: **905 KERN DR. EL PASO, TX 79902**

7 Amount of contribution (\$): **\$200.⁰⁰**
8 In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date: **5/24/2013**
Full name of contributor: **ANTHONY MULLEN**
Contributor address; City; State; Zip Code: **304 ROSEMONT EL PASO, TX 79922**

Amount of contribution (\$): **\$500.⁰⁰**
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: **5/24/2013**
Full name of contributor: **MARK H. BARNETT**
Contributor address; City; State; Zip Code: **8272 GATEWAY EAST EL PASO, TX 79907**

Amount of contribution (\$): **\$500.⁰⁰**
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: **5/24/2013**
Full name of contributor: **LAURA ANN AGUILAR**
Contributor address; City; State; Zip Code: **401 CRESTMONT DR. EL PASO, TX 79912**

Amount of contribution (\$): **\$25.⁰⁰**
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date: **5/25/2013**
Full name of contributor: **ANDREW AVILA**
Contributor address; City; State; Zip Code: **6365 LOS ROBLES DR. EL PASO, TX 79912**

Amount of contribution (\$): **\$250.⁰⁰**
In-kind contribution description (if applicable):
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/25/2013

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

LES PARKER

6 Contributor address; City; State; Zip Code

293 PUESTA DEL SOL
EL PASO, TX 79912

7 Amount of contribution (\$)

\$300.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/26/2013

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

JEFFREY B. KECKLEY

Contributor address; City; State; Zip Code

1221 CERRITO ALEGRE
EL PASO, TX 79912

Amount of contribution (\$)

\$1,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/28/2013

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

ANDY DOMINGUEZ

Contributor address; City; State; Zip Code

1608 BILLY CASPER
EL PASO, TX 79936

Amount of contribution (\$)

\$1,500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/28/2013

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

ANTHONY W. BAIRD

Contributor address; City; State; Zip Code

4940 PIKES PEAK
EL PASO, TX 79904

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/30/2013

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

LOUIS ALPERN, M.D.

Contributor address; City; State; Zip Code

4171 N. MESA BLDG. D, STE. 100
EL PASO, TX 79902

Amount of contribution (\$)

\$2,500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date ✓ 5/30/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LAURA K. ALPERN, PH.D.	7 Amount of contribution (\$) \$2,500.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4171 N. MESA BLDG. D, STE. 100 EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
✓ 5/31/2013	EPM POLICE OFFICERS ASSOCIATION Contributor address; City; State; Zip Code 747 E. SAN ANTONIO, STE. 103 EL PASO, TX 79901	\$5,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 5/31/2013	RICARDO MEDINA Contributor address; City; State; Zip Code 299 VAQUERO LN. EL PASO, TX 79902	\$100.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 6/1/2013	GERALD RUBIN Contributor address; City; State; Zip Code 538 LAUREL CANYON EL PASO, TX 79912	\$5,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 6/1/2013	JOHN M. FIELDS Contributor address; City; State; Zip Code 6385 FRANKLIN TRAIL DR. EL PASO, TX 79912	\$1,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date ✓ 6/1/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALD R. MARGO II	7 Amount of contribution (\$) \$1,000.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 201 E. MAIN 1603 EL PASO, TX 79901		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
✓ 6/3/2013	HECTOR FLORES Contributor address; City; State; Zip Code 292 EVEREST DR. EL PASO, TX 79912	\$100.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 6/3/2013	HECTOR ALMEIDA Contributor address; City; State; Zip Code 6043 BANDOLERO EL PASO, TX 79912	\$200.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 6/3/2013	FRANK E. GRAF Contributor address; City; State; Zip Code 4652 GLOBE WILLOW DR. EL PASO, TX 79922	\$50.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
✓ 6/3/2013	RONALD C. MALOOLY Contributor address; City; State; Zip Code 3737 GATEWAY WEST EL PASO, TEXAS 79903	\$500.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2013 JUN 11 PM 5:11

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME
OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date
✓ 6/3/2013

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

CHERYL MALOOLY

6 Contributor address; City; State; Zip Code

**3737 GATEWAY WEST
EL PASO, TX 79903**

7 Amount of contribution (\$)

\$500.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

✓ 6/3/2013

G. MALOOLY

Contributor address; City; State; Zip Code

**3737 GATEWAY WEST
EL PASO, TX 79903**

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

✓ 4/26/2013

LINEBARGER GOGGAN

Contributor address; City; State; Zip Code

**P.O. BOX 17428
AUSTIN, TX 78760**

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

✓ 5/21/2013

LINEBARGER GOGGAN

Contributor address; City; State; Zip Code

**P.O. BOX 17428
AUSTIN, TX 78760**

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

✓ 6/4/2013

CARLOS AGUILAR

Contributor address; City; State; Zip Code

**3414 MONTANA AVE.
EL PASO, TX 79903**

Amount of contribution (\$)

\$ 200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/5/2013

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

DORA OAXACA

6 Contributor address; City; State; Zip Code

300 BANDOLINA DR.
EL PASO, TX 79927

7 Amount of contribution (\$)

\$50.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/5/2013

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

JULIUS LOWENBERG

Contributor address; City; State; Zip Code

222 HERMOSA
EL PASO, TX 79922

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

IGNACIO RIVERO

Contributor address; City; State; Zip Code

2901 W. SAM HOUSTON PKWY STE. E300
HOUSTON, TEXAS 77043

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

VICTOR M. MARQUEZ

Contributor address; City; State; Zip Code

205 DREAM SPIRIT
SANTA TERESA, NM 88008

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

ARMIDA TERAN

Contributor address; City; State; Zip Code

404 ROSE LN.
EL PASO, TX 79915

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2013 JUN 11 PM 1:11

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date ✓ 6/5/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVAN GARZA	7 Amount of contribution (\$) \$200.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7337 FRANKLIN DR. EL PASO, TX 79915		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date ✓ 6/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KATHY PORRAS	Amount of contribution (\$) \$200.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. BOX 1248 CANUTILLO, TX 79835		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date ✓ 6/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARIA TERESA GUTIERREZ	Amount of contribution (\$) \$100.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10708 ALCAZAR CT. EL PASO, TX 79935		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date ✓ 6/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANCARLO DA PRATO	Amount of contribution (\$) \$200.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4016 SIETE LEGUAS EL PASO, TX 79922		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date ✓ 6/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MR./MRS. FRANK SPENCER	Amount of contribution (\$) \$500.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1130 MONTANA EL PASO, TX 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/5/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JESUS REYES 6 Contributor address; City; State; Zip Code 436 MOCKINGBIRD EL PASO, TX 79907	7 Amount of contribution (\$) \$200.⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
6/5/2013	JAVIER REYES Contributor address; City; State; Zip Code 476 TIMBER OAKS EL PASO, TX 79932	\$2,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/5/2013	VICTOR R. REYES Contributor address; City; State; Zip Code 1301 N. OREGON # 300 EL PASO, TX 79902	\$2,000.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/5/2013	EMMA ACOSTA Contributor address; City; State; Zip Code 8904 WH BURGESS EL PASO, TX 79925	\$100.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/5/2013	RODOLFO FERNANDEZ -HEPO Contributor address; City; State; Zip Code 1033 CALLE PARQUE EL PASO, TX 79912	\$200.⁰⁰	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/3/2013

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

RICARDO AGUILAR

6 Contributor address; City; State; Zip Code

388 EMERALD BRK
EL PASO, TX 79928

7 Amount of contribution (\$)

\$1,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/6/2013

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

TOM BOHANNON

Contributor address; City; State; Zip Code

5525 N. STANTON
EL PASO, TX 79912

Amount of contribution (\$)

\$5,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/6/2013

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

MARK FENENBOCK

Contributor address; City; State; Zip Code

405 CAMINO REAL
EL PASO, TX 79912

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/7/2013

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

CHARLES CLARK

Contributor address; City; State; Zip Code

1139 EAGLE RIDGE DR.
EL PASO, TX 79912

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/2013

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

PAMELA ANDERSON

Contributor address; City; State; Zip Code

200 VILLAGE CT.
EL PASO, TX 79922

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/9/2013

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

DOUG RUTTER

6 Contributor address; City; State; Zip Code

220 THUNDERBIRD
EL PASO, TX 79912

7 Amount of contribution (\$)

\$50.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/10/2013

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

RICHARD GLANCEY

Contributor address; City; State; Zip Code

P.O. BOX 221546
EL PASO, TX 79913

Amount of contribution (\$)

\$125.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/12/2013

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

STEVE FINN

Contributor address; City; State; Zip Code

8020 ALAMEDA
EL PASO, TX 79915

Amount of contribution (\$)

\$1,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

ARLENE PAUCIELLO

Contributor address; City; State; Zip Code

3145 ROYAL CREST
EL PASO, TX 79936

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

GEORGE WAYNE

Contributor address; City; State; Zip Code

5595 WESTSIDE DR.
EL PASO, TX 79932

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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 JUN 11 2013

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/13/2013

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

HAROLD HAHN

6 Contributor address; City; State; Zip Code

2244 TRAWOOD
EL PASO, TX 79935

7 Amount of contribution (\$)

\$5,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/13/2013

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

RANDY MASSEY

Contributor address; City; State; Zip Code

11908 PASEO BONITO
EL PASO, TX 79936

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

SCOTT COHEN

Contributor address; City; State; Zip Code

5556 BACON RD.
OAKLAND, CA 94619

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/13/2013

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

CHRIS ROWLEY

Contributor address; City; State; Zip Code

3233 N. MESA
EL PASO, TX 79902

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/2013

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

FERNANDO PARRA

Contributor address; City; State; Zip Code

919 B AGUA CALIENTE
EL PASO, TX 79912

Amount of contribution (\$)

\$25.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2013 JUN 11 PM 5:11

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/13/2013

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

SUSAN MALONE

6 Contributor address; City; State; Zip Code

6205 VIA AVENTURA
EL PASO, TX 79912

7 Amount of contribution (\$)

\$25.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/13/2013

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

PHILIP GABBARD

Contributor address; City; State; Zip Code

727 C ESPADA
EL PASO, TX 79912

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/2013

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

RONALD SAENZ

Contributor address; City; State; Zip Code

4413 N. STANTON
EL PASO, TX 79902

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/2013

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

JOSEPH FRANDINA

Contributor address; City; State; Zip Code

1327 MURCHISON
EL PASO, TX 79902

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/2013

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

MARVIN ROSENBAUM

Contributor address; City; State; Zip Code

1200 BROWN RDG.
EL PASO, TX 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2013 JUN 11 9:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/14/2013

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

MICHAEL BALMER

6 Contributor address; City; State; Zip Code

1111 LOS JARDINES
EL PASO, TX 79912

7 Amount of contribution (\$)

\$1,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/14/2013

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

MARK FENENBOCK

Contributor address; City; State; Zip Code

405 CAMINO REAL AVE.
EL PASO, TX 79922

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/15/2013

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

KIM WILKINSON

Contributor address; City; State; Zip Code

709 DOVER CT.
EL PASO, TX 79922

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/17/2013

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

MARIE GARLAND

Contributor address; City; State; Zip Code

1800 N. STANTON
EL PASO, TX 79902

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/18/2013

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

MARK DORE

Contributor address; City; State; Zip Code

5721 N. STANTON
EL PASO, TX 79912

Amount of contribution (\$)

\$150.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT.
2013 JUN 11 PM 5:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

✓ 5/21/2013

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

SCOTT KOBREN

6 Contributor address; City; State; Zip Code

1212 CERRITO BELLO
EL PASO, TX 79912

7 Amount of contribution (\$)

\$100.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

✓ 5/22/2013

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

ROBERT FOSTER

Contributor address; City; State; Zip Code

6080 SURETY DR.
EL PASO, TX 79905

Amount of contribution (\$)

\$5,000.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/23/2013

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

VICTORIA BORREGO

Contributor address; City; State; Zip Code

P.O. BOX 164101
FORT WORTH, TX 76161

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/26/2013

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

MARK HEINS

Contributor address; City; State; Zip Code

750 SUNLAND
EL PASO, TX 79912

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

✓ 5/26/2013

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

JAMES RUBY

Contributor address; City; State; Zip Code

706 MISSISSIPPI
EL PASO, TX 79902

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CLERK
 JUN 11 11 51 AM '13

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/1/2013

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

RICHARD KNOPP

6 Contributor address; City; State; Zip Code

5756 BOX ELDER
EL PASO, TX 79932

7 Amount of contribution (\$)

\$100.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/1/2013

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

RICHARD KNOPP

Contributor address; City; State; Zip Code

5756 BOX ELDER
EL PASO, TX 79932

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

JAY ZIMMERMAN

Contributor address; City; State; Zip Code

1120 E. VANDELL DR.
EL PASO, TX 79902

Amount of contribution (\$)

\$250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

LLOYD INGRAHAM

Contributor address; City; State; Zip Code

625 CASCADE LN.
EL PASO, TX 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

JAIME PORTILLO

Contributor address; City; State; Zip Code

5905 N. MESA
EL PASO, TX 79912

Amount of contribution (\$)

\$200.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT.
JUN 11 AM 5:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/24/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: OSCAR VEGA JR.	7 Amount of contribution (\$) \$500.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 905 VIA PENASCO LN. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/28/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ALBERT GAMBOA JR.	Amount of contribution (\$) \$1,000.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10913 DON JANUARY DR. EL PASO, TX 79935		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ELAINE BARRON	Amount of contribution (\$) \$500.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 900 CHERRY HILL LN. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HECTOR A. FLORES	Amount of contribution (\$) \$100.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 292 EVEREST DR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RICHARD HARRIS	Amount of contribution (\$) \$100.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6169 LOS FELINOS CIR. EL PASO, TX 79912		(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.

CITY CLERK DEPT.
2013 JUN 11 PM 5:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/4/2013

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

TANIA SCHWARTZ

6 Contributor address; City; State; Zip Code

619 CAMINO REAL AVE.
EL PASO, TX 79922

7 Amount of contribution (\$)

\$5,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/4/2013

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

HELEN SOBOL VILLEGAS

Contributor address; City; State; Zip Code

3907 N. STANTON
EL PASO, TX 79902

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/3/2013

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

C.R. CRANFORD

Contributor address; City; State; Zip Code

1205 CERRITO ALEGRE
EL PASO, TX 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/4/13

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

NITA PHILLIPS

Contributor address; City; State; Zip Code

900 THUNDERBIRD
EL PASO, TX 79912

Amount of contribution (\$)

\$500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/4/2013

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

BARBARA BERLINER

Contributor address; City; State; Zip Code

213 NORTHWIND
EL PASO, TX 79912

Amount of contribution (\$)

\$300.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT
2013 JUN 11 PM 5:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/4/2013

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

DOUGLAS SCHWARTZ

6 Contributor address; City; State; Zip Code

P.O. BOX 13611
EL PASO, TX 79913

7 Amount of contribution (\$)

\$5,000.⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/4/2013

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

MR. & MRS H. HARRIS HATFIELD

Contributor address; City; State; Zip Code

1039 LOS JARDINES
EL PASO, TX 79912

Amount of contribution (\$)

\$100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

JAIME PAPA

Contributor address; City; State; Zip Code

7232 LONGSPUR
EL PASO, TX 79911

Amount of contribution (\$)

\$50.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

2013
 CLERK DEPT.
 JUN 11 PM 5:12

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/29/2013

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

ADAM FRANK

6 Contributor address; City; State; Zip Code

801 RIVER OAKS DR.
EL PASO, TX 79912

7 Amount of contribution (\$)

\$2,311.14

8 In-kind contribution description (if applicable)

IN-KIND
(SIGNS)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/1/2013

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

OSCAR LEESER

Contributor address; City; State; Zip Code

7101 N. MESA STE. A
EL PASO, TX 79912

Amount of contribution (\$)

\$800.00

In-kind contribution description (if applicable)

IN-KIND
(RENT)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/5/2013

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

KAY MOOY

Contributor address; City; State; Zip Code

11853 PETE ROSE
EL PASO, TX 79936

Amount of contribution (\$)

\$65.28

In-kind contribution description (if applicable)

(IN-KIND
FOOD FOR
VOLUNTEERS)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/2013

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

OSCAR LEESER

Contributor address; City; State; Zip Code

7101 N. MESA STE. A
EL PASO, TX 79912

Amount of contribution (\$)

\$52.80

In-kind contribution description (if applicable)

IN-KIND
CRICKET
PHONES

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/2013

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

KAY MOOY

Contributor address; City; State; Zip Code

11853 PETE ROSE
EL PASO, TX 79936

Amount of contribution (\$)

\$27.67

In-kind contribution description (if applicable)

IN-KIND
FOOD FOR
VOLUNTEERS

(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.

CLERK DEPT
 JUN 11 AM 5:15

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/5/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSCAR LEESER	7 Amount of contribution (\$) \$ 8.78	8 In-kind contribution description (if applicable) IN-KIND (U-HAUL FUEL, PROPANE)
6 Contributor address; City; State; Zip Code 7101 N. MESA STE. A EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/5/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROD STERLING	Amount of contribution (\$) \$64.27	In-kind contribution description (if applicable) IN-KIND (PAPER GOODS)
Contributor address; City; State; Zip Code 310 N. DALLAS EL PASO, TX 79901		(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)	
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)	

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.
2013 JUN 11 PM 5:12

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

3

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS:

⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

5-3-2013

7 Name of lender

OSCAR LEESER

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

\$1,164.07

6 Is lender a financial institution?

Y (N)

8 Lender address; City; State; Zip Code

7101 N. MESA ST. # 374
EL PASO, TX 79912

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

BUSINESS OWNER

13 Employer (See Instructions)

EL PASO HYUNDAI

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

5-13-2013

Name of lender

OSCAR LEESER

out-of-state PAC (ID#: _____)

Loan Amount (\$)

\$1,696.62

Is lender a financial institution?

Y (N)

Lender address; City; State; Zip Code

7101 N. MESA ST. # 374
EL PASO, TX 79912

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

BUSINESS OWNER

Employer (See Instructions)

EL PASO HYUNDAI

Description of Collateral

none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

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

CITY CLERK DEPT
2013 JUN 11 PM 5:00

SCHEDULE E

LOANS

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

3 ACCOUNT # (Ethics Commission Filers)

2 FILER NAME

OSCAR LEESER

4 TOTAL OF UNITEMIZED LOANS: → → → → → →

\$

5 Date of loan

5-17-2013

7 Name of lender

OSCAR LEESER

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

\$ 25,000.⁰⁰

10 Interest rate

11 Maturity date

6 Is lender a financial institution?

Y (N)

8 Lender address; City; State; Zip Code

7101 N. MESA ST. #374
EL PASO, TX 79912

12 Principal occupation / Job title (See Instructions)

BUSINESS OWNER

13 Employer (See Instructions)

EL PASO HYUNDAI

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

19 Amount Guaranteed (\$)

16 GUARANTOR INFORMATION

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

not applicable

21 Employer (See Instructions)

20 Principal Occupation (See Instructions)

Date of loan

5-11-2013

Name of lender

OSCAR LEESER

out-of-state PAC (ID#: _____)

Loan Amount (\$)

\$ 4,991.62

Is lender a financial institution?

Y (N)

Lender address; City; State; Zip Code

7101 N. MESA ST. #374
EL PASO, TX 79912

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

BUSINESS OWNER

Employer (See Instructions)

EL PASO HYUNDAI

Description of Collateral

none

Check if personal funds were deposited into political account

Amount Guaranteed (\$)

GUARANTOR INFORMATION

Name of guarantor

Guarantor address; City; State; Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

2013 JUN 11 PM 5:12
CLERK/DEPT.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

5-30-2013

7 Name of lender

OSCAR LEESER

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

\$1,511.20

6 Is lender a financial institution?

Y N

8 Lender address; City; State; Zip Code

7101 N. MESA ST. # 374
EL PASO, TX 79912

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

BUSINESS OWNER

13 Employer (See Instructions)

EL PASO HYUNDAI

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender a financial institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

CITY CLERK DEPT.
03 JUN 11 PM 5:12

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: 11	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
--	-------------------------------------	---

4 Date 5-2-2013	5 Payee name NAC
---------------------------	----------------------------

6 Amount (\$) \$9,258.52	7 Payee address; City; State; Zip Code 141 NAC DRIVE DUNCANVILLE, PA 16635
------------------------------------	---

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

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

Date 5-2-2013	Payee name NAC
-------------------------	--------------------------

Amount (\$) \$25.00	Payee address; City; State; Zip Code 141 NAC DRIVE DUNCANVILLE, PA 16635
-------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FEES	Description (If travel outside of Texas, complete Schedule T) WIRE TRANSFER FEE
-------------------------------	---	---

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

Date 5-3-2013	Payee name CARLOS SIERRA PUBLIC AFFAIRS
-------------------------	--

Amount (\$) \$3,400.00	Payee address; City; State; Zip Code 277 FLUORITE EL PASO, TX 79932
----------------------------------	--

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

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

Date 5-3-2013	Payee name DIANA VANEZ RAMIREZ
-------------------------	---

Amount (\$) \$2,424.97	Payee address; City; State; Zip Code P.O. BOX 497 EL PASO, TX 79943
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) POLLING EXPENSE	Description (If travel outside of Texas, complete Schedule T) POLL WORKERS
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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2013 CITY CLERK DEPT. PRINTS: 2

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-8-2013	5 Payee name EL DIARIO
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6 Amount (\$) \$1,008. ⁰⁰	7 Payee address; City; State; Zip Code 1801 TEXAS EL PASO, TEXAS 79901
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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)
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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 5-8-2013	Payee name EL PASO INC.
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Amount (\$) \$1,414. ⁰⁰	Payee address; City; State; Zip Code 120 PORFIRIO DIAZ EL PASO, TX 79902
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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)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-7-2013	Payee name BIG MEDIA
------------------	-------------------------

Amount (\$) \$487.13	Payee address; City; State; Zip Code 6600 N. MESA EL PASO, TX 79912
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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) 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 5-8-2013	Payee name WHAT'S UP
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Amount (\$) \$1,486	Payee address; City; State; Zip Code 120 PORFIRIO DIAZ EL PASO, TX 79902
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T)
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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 JUN 11 PM 5:32

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-10-2013	5 Payee name DIANA RAMIREZ
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6 Amount (\$) \$4,458. ⁰⁰	7 Payee address; City; State; Zip Code P.O. BOX 497 EL PASO, TX 79943
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) SALARIES	(b) Description (If travel outside of Texas, complete Schedule T) PHONE BANKERS
---------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-14-2013	Payee name NATHAN STEVENS
-------------------	------------------------------

Amount (\$) \$247.45	Payee address; City; State; Zip Code 1175 HUNTERS RIDGE EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE OVERHEAD	Description (If travel outside of Texas, complete Schedule T) PHONES
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-14-2013	Payee name RESULTS VIDEO
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Amount (\$) \$527.89	Payee address; City; State; Zip Code 4585 RIPLEY, BLDG. 2 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) TV PRODUCTION
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-14-2013	Payee name RMED SPORTING GOODS
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Amount (\$) \$2,252.68	Payee address; City; State; Zip Code 1501 WYOMING EL PASO, TX 79902
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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) 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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2013 JUN 1 PM 3:12 CITY CLERK DEPT.

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-16-2013	5 Payee name DYNAMIC GRAPHICS
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6 Amount (\$) \$1,948.50	7 Payee address; City; State; Zip Code 2002 GRANT AVE. EL PASO, TX 79903
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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) SIGNS
---------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-16-2013	Payee name DIANA RAMIREZ
--------------------------	------------------------------------

Amount (\$) \$4,084.00	Payee address; City; State; Zip Code P.O. BOX 497 EL PASO, TX 79943
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) SALARIES	Description (If travel outside of Texas, complete Schedule T) PHONE BANKERS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-17-2013	Payee name KDBC
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Amount (\$) \$5,049.00	Payee address; City; State; Zip Code 801 N. OREGON EL PASO, TX 79902
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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) MEDIA BUYS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-17-2013	Payee name K FOX
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Amount (\$) \$6,783.00	Payee address; City; State; Zip Code 6004 N. MESA EL PASO, TX 79912
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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) MEDIA BUYS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-17-2013	5 Payee name KINT
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6 Amount (\$) \$3,740. ⁰⁰	7 Payee address; City; State; Zip Code 5426 N. MESA EL PASO, TX 79912
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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) MEDIA BUYS
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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 5-17-2013	Payee name KTSM
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Amount (\$) \$4,772.75	Payee address; City; State; Zip Code 801 N. OREGON EL PASO, TX 79902
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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) MEDIA BUYS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-17-2013	Payee name KVIA
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Amount (\$) \$13,838. ⁰⁰	Payee address; City; State; Zip Code 4140 RIO BRAVO ST. EL PASO, TX 79902
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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) MEDIA BUYS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-17-2013	Payee name CLEAR CHANNEL
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Amount (\$) \$5,500. ⁰⁰	Payee address; City; State; Zip Code 2305 SPARKMAN 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)
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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
203

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-18-2013	5 Payee name CAMPAIGN GRID
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6 Amount (\$) \$3,500. ⁰⁰	7 Payee address; City; State; Zip Code 414 COMMERCE DR., SUITE 100 FORT WASHINGTON, PA 19034
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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) SOCIAL MEDIA
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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 5-18-2013	Payee name CAMPAIGN GRID
-------------------	-----------------------------

Amount (\$) \$25. ⁰⁰	Payee address; City; State; Zip Code 414 COMMERCE DR., SUITE 100 FORT WASHINGTON, PA 19034
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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) WIRE TRANSFER FEE
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-21-2013	Payee name RESULTS VIDEO
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Amount (\$) \$975. ⁰⁰	Payee address; City; State; Zip Code 4585 RIPLEY DR, BLDG #2 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) TV PRODUCTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-21-2013	Payee name EL DIARIO
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Amount (\$) \$971.04	Payee address; City; State; Zip Code 1801 TEXAS EL PASO, TEXAS 79901
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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)
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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 FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-21-2013	5 Payee name EL DIARIO
----------------------------	----------------------------------

6 Amount (\$) \$1,428.⁰⁰	7 Payee address; City; State; Zip Code 1801 TEXAS EL PASO, TX 79901
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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)
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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 5-22-2013	Payee name DYNAMIC GRAPHICS
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Amount (\$) \$482.⁰⁰	Payee address; City; State; Zip Code 2002 GRANT AVE. 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) 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 5-23-2013	Payee name VICTORY PHONES
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Amount (\$) \$152.22	Payee address; City; State; Zip Code 19 SAWMILL RD. BRANFORD, CT 06405
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OTHER	Description (If travel outside of Texas, complete Schedule T) PHONE SURVEY
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-24-2013	Payee name SIERRA PUBLIC AFFAIRS
--------------------------	--

Amount (\$) \$2,500.⁰⁰	Payee address; City; State; Zip Code 277 FLUORITE EL PASO, TX 79932
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) CONSULTING	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-24-2013	5 Payee name VICTORY PHONES	
6 Amount (\$) \$1,870.74	7 Payee address; City; State; Zip Code 19 SAWMILL RD. BRANFORD, CT 06405	
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) PHONE SURVEY
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5-29-2013	Payee name EL PASO INC.	
Amount (\$) \$489.00	Payee address; City; State; Zip Code 120 PORFIRIO DIAZ EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	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 5-29-2013	Payee name SOUTHWEST SENIOR	
Amount (\$) \$652.50	Payee address; City; State; Zip Code 120 PORFIRIO DIAZ EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	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 5-29-2013	Payee name PDX PRINTING	
Amount (\$) \$1,534.59	Payee address; City; State; Zip Code 100 PORFIRIO DIAZ EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	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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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-30-2013	5 Payee name LEVY AD GROUP
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6 Amount (\$) \$8,969.10	7 Payee address; City; State; Zip Code 5905 S. DECATUR #1 LAS VEGAS, NV 89118
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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)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-31-2013	Payee name EL PASO TIMES
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Amount (\$) \$14,959.80	Payee address; City; State; Zip Code P.O. BOX 20 EL PASO, TX 79901
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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)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-31-2013	Payee name RMED SPORTING GOODS
--------------------------	--

Amount (\$) \$901.72	Payee address; City; State; Zip Code 1501 WYOMING 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) SHIRTS
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5-31-2013	Payee name VICTORY PHONES
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Amount (\$) \$959.96	Payee address; City; State; Zip Code 19 SAWMILL BRANFORD, CT 06405
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OTHER	Description (If travel outside of Texas, complete Schedule T) PHONE SURVEY
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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2013 JUN 11 PM 5:12

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5-31-2013		5 Payee name KFOX			
6 Amount (\$) \$3,638.⁰⁰		7 Payee address; City; State; Zip Code 6004 N. MESA EL PASO, TX 79912			
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) MEDIA BUYS	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-31-2013		Payee name KDBC			
Amount (\$) \$3,051.50		Payee address; City; State; Zip Code 801 N. OREGON EL PASO, TX 79902			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-31-2013		Payee name KINT			
Amount (\$) \$2,295.⁰⁰		Payee address; City; State; Zip Code 5426 N. MESA EL PASO, TX 79912			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-31-2013		Payee name KTSM			
Amount (\$) \$2,169.⁰⁰		Payee address; City; State; Zip Code 801 N. OREGON EL PASO, TX 79902			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5-31-2013	5 Payee name KVIA
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6 Amount (\$) \$5401.75	7 Payee address; City; State; Zip Code 4140 RIO BRAVO EL PASO, TX 79902
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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) MEDIA BUYS
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-3-2013	Payee name NATHAN STEVENS
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Amount (\$) \$802.78	Payee address; City; State; Zip Code 1175 HUNTERS RIDGE EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OFFICE OVERHEAD	Description (If travel outside of Texas, complete Schedule T) PHONES
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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	Payee name DEMOCRACY ENGINE
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Amount (\$) \$1,643	Payee address; City; State; Zip Code 850 QUINCY ST., NW #402 WASHINGTON, DC 20011
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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) TRANSACTION FEES
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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2013 JUN 11 11:51:19 CITY CLERK DEPT.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED