

# 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: <b>5</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST LAST Raul Amaya NICKNAME SUFFIX F.	<b>OFFICE USE ONLY</b> Date Received 2013 MAY - 2 AM 9:49 CITY CLERK DEPT. 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 10375 Biscayne St. El Paso, TX 79974		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( )		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST LAST Raul Amaya NICKNAME SUFFIX F.		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10375 Biscayne St, El Paso, TX 79974		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 383-7732		
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 4 / 12 / 2013    5 / 2 / 2013		
11 ELECTION	ELECTION DATE Month Day Year 5 / 11 / 13	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)  City Council, District 4	
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

14 C/OH NAME

*Raul F. Amaya*

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> additional pages	COMMITTEE NAME	CITY CLERK DEPT. 2013 MAY - 2 AM 9:49
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS

- TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED
- TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)
- TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED
- TOTAL POLITICAL EXPENDITURES
- TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD
- TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

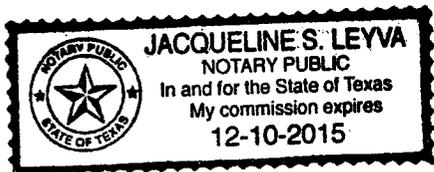
\$ 19.90  
\$ 19.90  
\$ 91.80  
\$ 261.79  
\$ 24.47  
\$ 2,300<sup>81</sup>

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

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.

*Raul F. Amaya*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Raul F. Amaya*, this the *2nd* day of *May*, 20 *13*, to certify which, witness my hand and seal of office.

*Jacqueline S. Leyva*      *Jacqueline S. Leyva*      *Notary*  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1

2 FILER NAME

Raul F. Amaya

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS: → → → → → →

\$ 7,300<sup>00</sup>

5 Date of loan

4/24/13

7 Name of lender

Raul F. Amaya

out-of-state PAC (ID#: \_\_\_\_\_)

9 Loan Amount (\$)

7,300<sup>00</sup>

6 Is lender a financial institution?

Y  N

8 Lender address; City; State; Zip Code

10375 Biscaine St. El Paso, TX 79924

10 Interest rate

0%

11 Maturity date

-

12 Principal occupation / Job title (See Instructions)

Financial Services Entrepreneur

13 Employer (See Instructions)

Self Employed

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

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

not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed (\$)

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 MAY 12 AM 9:49

**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.

<b>1</b> Total pages Schedule F: <u>1</u>		<b>2</b> FILER NAME <u>Raul F. Amaya</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>4/17/13</u>		<b>5</b> Payee name <u>Webs</u>			
<b>6</b> Amount (\$) <u>\$ 19.90</u>		<b>7</b> Payee address; City; State; Zip Code <u>Silver Spring, MD</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Advertising</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>web site</u>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Raul F. Amaya</u>		Office sought / Office held <u>City Council, District 4</u>	
Date <u>4/18/13</u>		Payee name <u>Northeast Printing</u>			
Amount (\$) <u>\$131.56</u>		Payee address; City; State; Zip Code <u>9728-E. Dyer, El Paso, TX 79924</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <u>Advertising</u>		Description (If travel outside of Texas, complete Schedule T) <u>SIGNS</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought / Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		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		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		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	

CITY CLERK DEPT.  
 2013 MAY - 2 AM 9:49

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

2013 MAY -2 AM 9:49  
CITY CLERK DEPT.

1 Total pages Schedule G:		2 FILER NAME <i>Raul F. Amaya</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/18/13</i>		5 Payee name <i>Northeast Printing</i>			
6 Amount (\$) <i>95.69</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <i>9728-E. Dyer, El Paso, TX 79924</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Signs</i>	
Date <i>4/24/13</i>		Payee name <i>Go Direct Mail Marketing</i>			
Amount (\$) <i>\$2,292.74</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>8400 Boeing Dr., El Paso, TX 79925</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>mailers</i>	
Date <i>4/27/13</i>		Payee name <i>Sams</i>			
Amount (\$) <i>51.36</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>7001 Gateway Blvd. W., El Paso, TX 79925</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Meet + Greet Candidate</i>	
Date <i>4/30/13</i>		Payee name <i>Walmart</i>			
Amount (\$) <i>20.54</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <i>4530 Woodrow Bean, El Paso, TX 79924</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Printing Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Ink Jet</i>	

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