

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Texas Equity PAC		ACCOUNT # 00053491	
13 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party)	A. Supported	
		B. Opposed	
	2. Measures (describe by date and location of election and nature of issue)	A. Supported	Ballot ID: Prop 7 Election Date: 05/11/2013 Description: Yes on Prop 7: Keep El Paso Equal
		B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party)			
14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$100 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD) <input checked="" type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.	\$ 0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,445.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,326.97	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 505.79	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00	
<p>15 AFFIDAVIT</p> <p style="text-align: center;">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.</p> <p style="text-align: right; margin-right: 20%;">_____ Signature of Campaign Treasurer</p> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath</p>			

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78711-2070 (512)463-5800

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

2013 APR 11 AM 10:11

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 3/9	
2 FILER NAME Texas Equity PAC		3 ACCOUNT # (Ethics Commission filers) 00053491	
4 Date 03/08/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ardivino, Marina (Ms.) 6 Contributor address; City; State; Zip Code 4221 Hampshire Ln El Paso, TX 79902	7 Amount of contribution (\$) \$60.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Restaurant owner		10 Employer (See Instructions) Ardivino's Desert Crossing	
Date 01/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunelle, Jason (Mr.) Contributor address; City; State; Zip Code 2606 Stanford Apt 2 Houston, TX 77006	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Landmark Theatres	
Date 01/31/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunelle, Jason (Mr.) Contributor address; City; State; Zip Code 2606 Stanford Apt 2 Houston, TX 77006	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Landmark Theatres	
Date 03/04/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunelle, Jason (Mr.) Contributor address; City; State; Zip Code 2606 Stanford Apt 2 Houston, TX 77006	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Landmark Theatres	
Date 04/01/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunelle, Jason (Mr.) Contributor address; City; State; Zip Code 2606 Stanford Apt 2 Houston, TX 77006	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Landmark Theatres	

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2013 APR 11 AM 10:11

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 4/9	
2 FILER NAME Texas Equity PAC		3 ACCOUNT # (Ethics Commission filers) 00053491	
4 Date 03/08/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horak, Ann (Ms.) 6 Contributor address; City; State; Zip Code 617 Cincinnati El Paso, TX 79902	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) University of Texas at El Paso	
Date 03/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marcus, David (Mr.) Contributor address; City; State; Zip Code 442 Crown Point Drive El Paso, TX 79912	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Marcus Fairall Bristol & Co	
Date 03/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNabb, Charles (Mr.) Contributor address; City; State; Zip Code 5020 Montoya Drive El Paso, TX 79922	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gordon Davis Johnson Shane PC	
Date 03/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sapp, Gary (Mr.) Contributor address; City; State; Zip Code 3124 Piedmont Dr El Paso, TX 79902	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real estate developer		Employer (See Instructions) Hunt Companies	
Date 01/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Chuck (Mr.) Contributor address; City; State; Zip Code 1713 Newfield Ln Austin, TX 78703	Amount of contribution (\$) \$1,250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Deputy Executive Director		Employer (See Instructions) Equality Texas	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/3 Report: 5/9	
2 FILER NAME Texas Equity PAC		3 ACCOUNT # (Ethics Commission filers) 00053491	
4 Date 01/26/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Chuck (Mr.) 6 Contributor address; City; State; Zip Code 1713 Newfield Ln Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Deputy Executive Director		10 Employer (See Instructions) Equality Texas	
Date 02/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Chuck (Mr.) Contributor address; City; State; Zip Code 1713 Newfield Ln Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Deputy Executive Director		Employer (See Instructions) Equality Texas	
Date 03/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Chuck (Mr.) Contributor address; City; State; Zip Code 1713 Newfield Ln Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Deputy Executive Director		Employer (See Instructions) Equality Texas	
Date 03/08/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Velarde, Linda (Ms.) Contributor address; City; State; Zip Code 1100 East Nevada St El Paso, TX 79902	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Texas Rural Legal Aide	

POLITICAL EXPENDITURES

2013 APR 11 AM 10:11

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/4 Report: 6/9	2 FILER NAME Texas Equity PAC	3 ACCOUNT # (TEC filers) 00053491
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4 Date 01/31/2013	5 Payee name American Express
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6 Amount (\$) \$7.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City; State; Zip Code P O Box 650448 Dallas, TX 75265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/28/2013	Payee name American Express
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Amount (\$) \$7.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code P O Box 650448 Dallas, TX 75265
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant 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 03/31/2013	Payee name American Express
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Amount (\$) \$7.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code P O Box 650448 Dallas, TX 75265
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant 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 01/01/2013	Payee name Equality Federation
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Amount (\$) \$45.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 567 Sutter St, 3rd Floor San Francisco, CA 94102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant gateway fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES 2013 APR 11 AM 10:12 **SCHEDULE F**

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/4 Report: 7/9	2 FILER NAME Texas Equity PAC	3 ACCOUNT # (TEC filers) 00053491
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4 Date 02/01/2013	5 Payee name Equality Federation
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6 Amount (\$) \$45.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City; State; Zip Code 567 Sutter St, 3rd Floor San Francisco, CA 94102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant gateway fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/01/2013	Payee name Equality Federation
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Amount (\$) \$45.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 567 Sutter St, 3rd Floor San Francisco, CA 94102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant gateway 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 04/01/2013	Payee name Equality Federation
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Amount (\$) \$45.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 567 Sutter St, 3rd Floor San Francisco, CA 94102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant gateway 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 01/16/2013	Payee name Gay & Lesbian Victory Fund
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Amount (\$) \$1,250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 1133 15th St NW Suite 350 Washington, DC 20005
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to Gay & Lesbian Victory Fund
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/4 Report: 8/9		2 FILER NAME Texas Equity PAC		3 ACCOUNT # (TEC filers) 00053491	
4 Date 01/31/2013		5 Payee name JPMorgan Chase Bank NA			
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address City; State; Zip Code PO Box 659754 San Antonio, TX 78265			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/28/2013		Payee name JPMorgan Chase Bank NA			
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code PO Box 659754 San Antonio, TX 78265			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/31/2013		Payee name JPMorgan Chase Bank NA			
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code PO Box 659754 San Antonio, TX 78265			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/20/2013		Payee name Lunarpages			
Amount (\$) \$19.95 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code 100 E La Habra Blvd La Habra, CA 90631			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Domain registration fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

2013 APR 11 AM 10:12 SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/4 Report: 9/9	2 FILER NAME Texas Equity PAC	3 ACCOUNT # (TEC filers) 00053491
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4 Date 03/13/2013	5 Payee name Stanton Street
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6 Amount (\$) \$700.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City; State; Zip Code 500 W Overland St Suite 200 El Paso, TX 79901
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Acti-Vote Software
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/31/2013	Payee name Transfirst
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Amount (\$) \$82.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 12202 Airport Way Suite 100 Broomfield, CO 80021
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internet merchant 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 02/28/2013	Payee name Transfirst
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Amount (\$) \$13.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 12202 Airport Way Suite 100 Broomfield, CO 80021
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internet merchant 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 03/31/2013	Payee name Transfirst
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Amount (\$) \$13.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code 12202 Airport Way Suite 100 Broomfield, CO 80021
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internet merchant 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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