



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

13 C/OH NAME Svarzbein, Peter (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
00009876

15 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

Friends for Peter Svarzbein

GENERAL

COMMITTEE ADDRESS

705 E. Baltimore El Paso TX 79902

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

Noel R. Rosenbaum

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

405 Valplano Drive El Paso TX 79912

CITY CLERK DEPT.  
2015 MAY 14 PM 4:51

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 242.38

4. TOTAL POLITICAL EXPENDITURES \$ 7,030.10

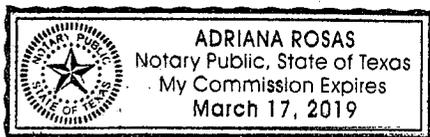
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 10,685.10

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 AFFIDAVIT



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

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Peter Gary Svarzbein, this the 14th day of May, 2015, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Adriana Rosas  
Print name of officer administering oath

Notary Public  
Title of officer administering oath

# 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.

<b>1</b> PAGE # Schedule: 1/2 Report: 3/4	<b>2</b> FILER NAME Svarzbein, Peter (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00009876
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<b>4</b> Date 01/06/2015	<b>5</b> Payee name Academy Sports
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<b>6</b> Amount (\$) \$47.28	<b>7</b> Payee address City; State; Zip Code 801 S. Mesa Hills El Paso, TX 79912
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cooler for block walkers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 01/07/2015	Payee name Academy Sports
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Amount (\$) \$346.36	Payee address City; State; Zip Code 801 S. Mesa Hills El Paso, TX 79912
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Polling Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Shoes for door-to-door canvassers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 01/02/2015	Payee name Casteneda, Oscar
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Amount (\$) \$400.00	Payee address City; State; Zip Code 200 Atlantic El Paso, TX 79922
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign designer  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 01/05/2015	Payee name Coronado Tower LLC
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Amount (\$) \$2,000.00	Payee address City; State; Zip Code 6600 N. NMesa Suite 212 El Paso, TX 79912
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> rental payment for 6th floor office suite  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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.

<b>1</b> PAGE # Schedule: 2/2 Report: 4/4		<b>2</b> FILER NAME Svarzbein, Peter (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00009876	
<b>4</b> Date 01/09/2015		<b>5</b> Payee name Duran, Alberto			
<b>6</b> Amount (\$) \$2,000.00		<b>7</b> Payee address City; State; Zip Code 2630 Copper Ave. El Paso, TX 79930			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign manager  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/09/2015		Payee name iPrintLife			
Amount (\$) \$119.08		Payee address City; State; Zip Code 900 Loma Verde Suite E El Paso, TX 79912			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Signs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/09/2015		Payee name Leahy, Matthew			
Amount (\$) \$1,300.00		Payee address City; State; Zip Code 429 Palmary El Paso, TX 79912			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign strategist  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/05/2015		Payee name Teas Democratic Party			
Amount (\$) \$575.00		Payee address City; State; Zip Code 4819 E. Ben White Blvd. Ste. 104 Austin, TX 78741			
<b>8</b> PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Polling Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Right to use VAN maintained by Tex. Dem Party  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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