Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

CITY CLERK DEPARTMENT

The C/OH INSTRUCTION GUIDE explains how to complete this form.

2003 APR 4 AM 11 12

1 ACCOUNT # (Ethics Commission filers)

2 Total pages filed: 23

3 CANDIDATE / OFFICEHOLDER NAME	TITLE / FIRST: Alfred / MI: S. / NICKNAME: "STAN" / LAST: ROBERTS. / SUFFIX	OFFICE USE ONLY: Date Received; Date Hand-delivered or Date Postmarked; Receipt #; Amount; Date Processed; Date Imaged
4 CANDIDATE / OFFICEHOLDER ADDRESS ☐ Change of Address	ADDRESS / PO BOX: 9812 TITAN ST / APT / SUITE #: / CITY: EL PASO / STATE: Texas / ZIP CODE: 79924	
5 CAMPAIGN TREASURER NAME	TITLE / FIRST: David / MI: C / NICKNAME: / LAST: MORROW / SUFFIX:	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 9844 VANDERBURG / APT / SUITE #: / CITY: EL PASO / STATE: Texas / ZIP CODE: 79924	
7 CAMPAIGN TREASURER PHONE	AREA CODE: (915) / PHONE NUMBER: 755-2627 / EXTENSION:	

OFFICE USE ONLY: 2003 APR 4 AM 11 12 CITY CLERK DEPARTMENT

8 REPORT TYPE

- ☐ January 15
- ☒ 30th day before election
- ☐ Runoff
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☐ July 15
- ☐ 8th day before election
- ☐ Exceeded $500 limit
- ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month / Day / Year: Jan / 15 / 2003 THROUGH Month / Day / Year: April / 2 / 2003

10 ELECTION

ELECTION DATE — Month / Day / Year: May / 3 / 2003

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): Northeast City Representative District #4

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

•• Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ••

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Alfred S. Roberts Jr (STAN Roberts)

15 ACCOUNT # (Ethics Commission filers):

16 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
- [x] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME: Committee To Elect Stan Roberts

COMMITTEE ADDRESS: 9844 VANDERBURG, EL PASO, TEXAS 79924

COMMITTEE CAMPAIGN TREASURER NAME: David C. Monrow.

COMMITTEE CAMPAIGN TREASURER ADDRESS: 9844 VANDERBURG EL PASO TEXAS 79924

[ ] additional pages

17 NO REPORTABLE ACTIVITY

[ ] Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 12,374.88
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 6,668.37
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 5,000.00

19 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.

RACHEL LOPEZ
Notary Public
State of Texas
My Commission Expires
December 27, 2006

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alfred S Roberts Sr, this the 4th day of April, 2003, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Rachel Lopez | MBR Serv. Specialist/Notary
Printed name of officer administering oath | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 10. pages.

2 FILER NAME: ALFRED S. ROBERTS JR.

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
15 JAN 2003.	CARRYOVER FROM LAST CAMPAIGN	8,974.88	

9 Principal occupation (Optional):
10 Employer (Optional):

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)
25 Feb 2003	DAVID R. BURGER 10729 SUNSTONE ST EL PASO, TEXAS 79924	20.00	

Principal occupation (Optional):
Employer (Optional):

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)
20 MAR 2003	BERTHA ZUBIATE 3509 LINCOLN AVE EL PASO, TEXAS 79930		50.00 Design of Kick off invitations

Principal occupation (Optional):
Employer (Optional):

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)
20 MAR 2003	Seth ROBERTS. 9812 TITAN ST EL PASO, TEXAS 79924		50.00 Photo's for flyer & invitations

Principal occupation (Optional):
Employer (Optional):

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)
21 MAR 2003.	22 Supporters various		200.00 Folding & Addressing FLYERS.

Principal occupation (Optional):
Employer (Optional):

ATTACH ADDITIONAL COPIES OF THIS FORM 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 A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME: ALFRED S. ROBERTS JR.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
25 MAR 2003	RICHARD L. COLE 9845 FRIENDSHIP SEVEN EL PASO, TEXAS 79924	20.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
25 MAR 2003	RUDOLF HUNTER 10933 YOGI BERRA EL PASO, TEXAS 79924	10.00	

Principal occupation (Optional)	Employer (Optional)

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)
25 MAR 2003	CLARENCE F. KLINE 9560 POINCIANA. EL PASO, TEXAS 79924	25.00	

Principal occupation (Optional)	Employer (Optional)

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)
25 MAR 2003	HERBERT C. MOTT 5600 PANTHER EL PASO, TEXAS 79924	25.00	

Principal occupation (Optional)	Employer (Optional)

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)
26 MAR 2003	THOMAS R. DAVIS 5621 VAN HORN EL PASO, TEXAS 79924	100.00	

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME: Alfred S. ROBERTS JR.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
26 MAY 2003.	NORMA M. KUDIESH 5401 RAYMOND TELLES EL PASO, TEXAS 79924	25.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
26 MAY 2003	CHARLES J. PILLSBURY 4621 R. T. CASSIDY EL PASO, TEXAS 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
26 MAY 2003	HOWARD SCHROEDER 8814 GALENA EL PASO, TEXAS 79924	25.00	

Principal occupation (Optional)	Employer (Optional)

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)
26 MAY 2003	MAX E. SQUIRE 8817 MT DELANO	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
27 MAY 2003	HOWARD F. SWALLOWS 5105 YUETTE EL PASO, TEXAS 79924	20.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
28 MAR 2003	GARVENE PHILLIPS 2928 STONE EDGE EL PASO, TEXAS 79924	30.00	

9 Principal occupation (Optional)

10 Employer (Optional)

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)
28 MAR 2003	JOHN E. NIMUCS.	200.00	

Principal occupation (Optional)

Employer (Optional)

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)
29 MAR 2003	SUNDOWNERS.		250.00 BAND.

Principal occupation (Optional)

Employer (Optional)

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)
29 MAR 2003	Victorin's Restaurant. Dyer ST EL PASO, TEXAS 79924		30.00 chips & SALSA.

Principal occupation (Optional)

Employer (Optional)

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)
29 MAR 2003	ROBIN Hood PARK Dyer ST EL PASO, TEXAS 79924		200.00 USE OF HALL for Kick off

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME: Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
29 MAR 2003.	various supporters		100.00 food for kickoff

9 Principal occupation (Optional)	10 Employer (Optional)

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)
29 MAR 2003.	12 Supporters		200.00 installing signs.

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	Norm Gardner. / 6277 Camino Alegre, El Paso, Texas. 79912		100.00 use of truck & for parade

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	Natsuko Ambrose. / 10753 Whitesands, El Paso, Texas 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	Robert Burgess / 4004 Titanic, El Paso, Texas 79924	100.00	

Principal occupation (Optional)	Employer (Optional)

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1 Total pages this Schedule A1:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
29 MAR 2003	NORMAN GARNER 6277 CAMINO ALEGRE EL PASO, TEXAS 79912	50.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
29 MAR 2003	JOHN R. HOOVER 9917 TITAN ST EL PASO, TEXAS 79924	30.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	MARY D. HORVATH 5308 MICKEY MANTLE EL PASO, TEXAS 79934	25.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	CASH from Kick off Party	150.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAR 2003	CASH From Kick off PARTY	100.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME: Alfred S. Roberts

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
29 MAY 2003	RAY NOWAK 10176 LAKEVIEW EL PASO TEXAS 79924	50.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
29 MAY 2003	NORMAN GANNER 6277 CAMINO ALEGRE EL PASO, TEXAS 79912	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	PAUL B. PARSONS. 4736 EL CAMPO EL PASO TEXAS 79924	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	JACK F. PIERCE. 108 SHERWOOD FORREST EL PASO TEXAS, 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	DOUG RAMSEY. 2912 TITANIC EL PASO, TEXAS 79904	50.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
29 MAY 2003	JANE RATCLIFF 8706 MAGNETIC EL PASO TEXAS 79904	50.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
29 MAY 2003	DAVID SCEPANSKI 10412 GAIUS. EL PASO, TEXAS 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	WILLIAM O. SCHULTHEISS 10753 WHITE SANDS. EL PASO, TEXAS 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	ROBERT B. STONE. 4836 SUN VALLEY EL PASO, TEXAS 79924	25.00	

Principal occupation (Optional)	Employer (Optional)

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)
29 MAY 2003	JOHN W. VANDEVEN 9205 OMAR BRADLEY EL PASO, TEXAS 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
29 MAR 2003	WILLIAM D. WRIGHT 5809 REGULUS EL PASO, TEXAS 79924	50.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
29 MAR 2003	WILLIAM W. KUENGEL 10154 BONAIRE EL PASO, TEXAS 79924	100.00	

Principal occupation (Optional)	Employer (Optional)

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)
31 MAR 2003	RICHARD H. HOLLENBECK. 10440 CRETE EL PASO, TEXAS 79924	50.00	

Principal occupation (Optional)	Employer (Optional)

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)
1 April 2003	WALTER F. MARECZKO 3303 GARNET EL PASO, TEXAS 79904	15.00	

Principal occupation (Optional)	Employer (Optional)

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)
1 April 2003	ROBERT E. RHODES 10329 UVALDE EL PASO, TEXAS 79924	25.00	

Principal occupation (Optional)	Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
1 April 2003	GRACE M. ROLLER 1619 HOWZE EL PASO, TEXAS 79903	50.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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)
2 April 2003	MG JOHN B. OBLINGER 8512 MTN WILLOW DR EL PASO TEXAS 79904	25.00	

Principal occupation (Optional)	Employer (Optional)

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)

Principal occupation (Optional)	Employer (Optional)

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)

Principal occupation (Optional)	Employer (Optional)

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)

Principal occupation (Optional)	Employer (Optional)

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PLEDGED CONTRIBUTIONS

SCHEDULE B1
(FOR FORMS C/OH, SC-C/OH, SC-SPAC, & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule B1: 0

2 FILER NAME: Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date	6 Full name of pledgor ☐ out-of-state PAC (ID#:_____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge ($)	9 In-kind description (if applicable)

10 Principal occupation (optional) | 11 Employer (optional)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Principal occupation (optional) | Employer (optional)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Principal occupation (optional) | Employer (optional)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Principal occupation (optional) | Employer (optional)

Date	Full name of pledgor ☐ out-of-state PAC (ID#:_____) Pledgor address; City; State; Zip Code	Amount of pledge ($)	In-kind description (if applicable)

Principal occupation (optional) | Employer (optional)

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

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E: 1

2 FILER NAME: Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $

5 Date of loan: Carry over from prior Campaign

6 Is lender a financial Institution? Y (N)

7 Name of lender: Alfred S. Roberts Jr. ☐ out-of-state PAC (ID#:_____)

8 Lender address; City; State; Zip Code: 9812 TITAN ST El Paso, Texas 79924

9 Loan Amount ($): 5,000.00

10 Interest rate

11 Maturity date

12 Description of Collateral ☐ none

13 GUARANTOR INFORMATION ☐ not applicable

14 Name of guarantor

15 Guarantor address; City; State; Zip Code

16 Amount Guaranteed ($)

17 Principal Occupation

18 Employer

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

Description of Collateral ☐ none

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation

Employer

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

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 9.

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7 May 2001	County of El Paso. 500 E. San Antonio El Paso, Texas 79901	4.05.

8 Purpose of payment (See instructions regarding type of information required.) Election Results.

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9 May 2001	County of El Paso 500 E. San Antonio El Paso, Texas 79901	80.00

Purpose of payment (See instructions regarding type of information required.) Voters Registration Listing

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
13 Jun 2001	County of El Paso 500 E. San Antonio El Paso, Texas 79901	50.00

Purpose of payment (See instructions regarding type of information required.) Pct Voters History Dist 4 Runoff.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
30 July 2001	City of El Paso 2 Civic Center Plaza. El Paso, Texas 79901	2.20

Purpose of payment (See instructions regarding type of information required.) Copy of Campaign Contributions

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
19 JAN 2003.	Lowe's. 4531 TRANSMOUNTAIN EL PASO TEXAS 79924	1.94

8 Purpose of payment (See instructions regarding type of information required.) Nails for Signs

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
31 JAN 2003.	County of EL PASO. 500 E. SAN ANTONIO EL PASO, TEXAS 79901	50.00

Purpose of payment (See instructions regarding type of information required.) CD of North East Registered Voters

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
31 JAN 2003.	Party City 655. Sunland Park EL PASO, TEXAS 79912	55.99

Purpose of payment (See instructions regarding type of information required.) Kickoff Accessories.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4 Feb 2003.	Computer Shop. 8888 Dyer ST ste 510A.	16.18.

Purpose of payment (See instructions regarding type of information required.)

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4 Feb 2003.	Sam's. 7001 Gateway West. El Paso Texas 79925.	106.82

8 Purpose of payment (See instructions regarding type of information required.)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
computer ink.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6 Feb 2003.	Office max. 9801 Gateway West El Paso, Texas 79925	80.09.

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Printer ink.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
13 Feb 2003.	Sams 7001 Gateway West El Paso Texas 79925	73.31

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Printer ink.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
13 Feb 2003.	NORTH EAST Printing 9728 Dyer ST El Paso, Texas 79924	409.19

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
printing of Doorhangers.	

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
15 Feb. 2003.	Sam's. 7001 Gateway West El Paso, Texas 79925	8.39.

8 Purpose of payment (See instructions regarding type of information required.) Pickles & olives for kickoff.

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
27 Feb 2003.	Wall Mart 4530 Trans mountain El Paso, Texas 79924	4.53

Purpose of payment (See instructions regarding type of information required.) High Lighters

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1 Mar 2003	Office Depot 8701 Gateway West El Paso, Texas 79925.	20.70

Purpose of payment (See instructions regarding type of information required.) High Lighters

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4 Mar 2003.	BFI 2514 E. Yandell El Paso, Texas 79903.	81.18

Purpose of payment (See instructions regarding type of information required.) Labels for Address.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4 MAR 2003.	County of El Paso. 500 E. San Antonio El Paso, Texas 79901	120.00

8 Purpose of payment (See instructions regarding type of information required.): Printing of Addresse on Lables.

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
9 MAR. 2003.	Northeast Easter Parade.	45.00

Purpose of payment (See instructions regarding type of information required.): Entree Sea.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
13 MAR 2003.	McCoys. 9001 Gateway South. El Paso, Texas 79904	12.96

Purpose of payment (See instructions regarding type of information required.): Screws for Signs

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
13 MAR 2003	Lowe's, 4531 Transmountain El Paso Texas 79924	7.62

Purpose of payment (See instructions regarding type of information required.): Circles for Signs

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
18 MAR 2003.	Lowe's 4531 TRANSMOUNTAIN EL PASO, TEXAS 79924	8.85.

8 Purpose of payment (See instructions regarding type of information required.)
Blade Son Sow.

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
19 MAR 2003.	Office Depot. 8701 Gateway West EL PASO, TEXAS 79925.	50.82

Purpose of payment (See instructions regarding type of information required.)
Invitations Envelopes.

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
19 MAR 2003.	Talk TAG2 of El Paso. 10761 Pebble Hills #300 EL PASO, TEXAS 79935.	86.49.

Purpose of payment (See instructions regarding type of information required.)
Flashing Signs

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
20 MAR 2003.	Big 8 9817 Dyer EL PASO, TEXAS 79924.	28.10

Purpose of payment (See instructions regarding type of information required.)
Soda for Volunteers at Flyer Folding.

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
20 mar 2003.	Big 8. 9817 Dyer El Paso, Texas 79924	.86

8 Purpose of payment (See instructions regarding type of information required.)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Ice.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
21 mar 2003.	Northeast Printing 9728 Dyer st El Paso, Texas 79924	1515.50

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Printing of flyers.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
22 mar 2003.	Sam's. 7001 Gateway West El Paso, Texas 79925.	408.23

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Items for kick off party. & ink for printer	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
23 mar 2003.	Denny's. 9567 Dyer El Paso, texas 79924	7.77

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Committee members Lunch.	

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

2 FILER NAME Alfred S. Roberts Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
24 mar. 2003.	Postmaster El Paso 8401 Boeing El Paso, Texas 79925.	1900.00

8 Purpose of payment (See instructions regarding type of information required.) Mailing of flyers.

9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
24 mar 2003	Postmaster of El Paso. 8401 Boeing El Paso Texas 79925.	59.23

Purpose of payment (See instructions regarding type of information required.) Mailing of Kickoff invitations

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
mar 27, 2003,		113.66.

Purpose of payment (See instructions regarding type of information required.) magnetic Signs

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
28 mar 2003.	Ken weaver. Robin Hood Bank Dyer ST. El Paso, Texas 79924	25.00

Purpose of payment (See instructions regarding type of information required.) GAS. for putting out Signs.

•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
28 May 2003.	Lowe's 4531 Transmountain El Paso, Texas 79924	35.41

8 Purpose of payment (See instructions regarding type of information required.)	9 •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Island wine for Signs.	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
29 May 2003.	Sam's. 7001 Gateway West El Paso Texas 79925.	17.07.

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
items for Kickoff party	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
30 May 2003.	Lowe's. 4531 Transmountain El Paso, Texas 79924	1.23.

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held
Nails	

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1 April 2003.	None (in kind Contributions)	1180.00

Purpose of payment (See instructions regarding type of information required.)	•• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name / Office sought / Office held

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