

CAMPAIGN CONTRIBUTION REPORT FORM

PURSUANT TO ARTICLE XII OF THE EL PASO COUNTY CODE OF ETHICS FOR MEMBERS OF THE EL PASO COUNTY COMMISSIONERS COURT

RECEIVED

FEB 01 2010

COUNTY JUDGE

1. Article XII reporting requirements:

XII. Campaign Contributions

If a member of commissioners court, or candidate for a seat on commissioners court, accepts political campaign contributions of One Thousand and No/100 Dollars (\$1,000.00) or more, including in-kind contributions, from any one person or entity within a twelve month period, he shall report the amounts, the donor, and the dates of said contributions by an item on the agenda of the El Paso County Commissioners Court within 30 days of the date of said contribution. The report shall also be placed upon the El Paso County web page. In the event that the report is not made within 30 days, the disposition of the contribution shall be determined by the Board of Ethics.

2. The placement of this completed form on the agenda of the El Paso County Commissioners Court and its delivery to the El Paso County Board of Ethics for placement on the El Paso County web page shall satisfy the requirements of Article XII of the Code of Ethics.

3. Name of Person Reporting: Sergio Lewis

4. Donor(s) of contributions within a 12-month period, which exceed \$1000.00:
(List each contribution which when added together total in excess of \$1,000.00 from a single donor, and the date each contribution was received.)

DONOR NAME:	<u>Woody Hunt</u>	Date on Check	Date received
AMOUNT:	<u>\$1000⁰⁰</u>	DATE:	<u>1-26-2010 / 1-28-2010</u>
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____

DONOR NAME:	<u>El Paso Sheriff's Officers Assoc</u>	DATE:	<u>1-21-2010 / 1-28-2010</u>
AMOUNT:	<u>\$1000⁰⁰</u>	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____

DONOR NAME:	<u>Stanley P. Jabe</u>	DATE:	<u>1-19-2010 / 1-22-2010</u>
AMOUNT:	<u>\$1000⁰⁰</u>	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____

DONOR NAME:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____
AMOUNT:	_____	DATE:	_____