		RECTIO F IDATE/O	OR				COR-C/OH
ACCOUNT # 000	32066		2 PAGE #		1	of 95	
3	MS/MRS/MR	FIRST			И		
CANDIDATE/ OFFICEHOLDER	Hon.	Norma		N	VII	•••••	USE ONLY
NAME	NICKNAME	LAST Chavez		s	SUFFIX	Date Received	
	X January 15	Runoff		Other (specify	/)		
REPORT TYPE	July 15	Exceede	d \$500 limit			Date Hand-delivered or Date	Postmarked
	30th day before ele		after treasurer				
	8th day before elec		nent (officeholder port	only)		Receipt #	Amount
5 OBIGINAL	Month Day Ye	ear	Month	Day Y	Year	Legal	Totals
PERIOD COVERED						Date Processed	
	07/01/2007	THROUG	ан 1	2/31/2007	,	Date Imaged	
6 EXPLANATION OF CORF	RECTION						
This report clarifies informat original report related to ca clarifies the purpose for ce corrects errors in the origin amount paid to each vendor report matches the original reporting of political expen report correctly specified th purpose with the proper ex	ertain inadvertent errors. rtain political expenditure nal report related to the re- pr. The original report co- l correctly reported purpord ditures from personal fur- ne individual purpose for-	This report update es and in some cas eporting of reimbur rrectly specified the ose with the proper dds; this report ider which the political	s the employer es corrects ina sements to sta individual pur expenditure. T	r/occupation in dvertent error ff members; tl pose for which his report cor ate vendor an	nformation rs made in his report in h the polition rects error and amount in	for some contributo the original purpose dentifies the ultimate cal expenditures we s in the original repo- paid to each vendor	ors. This report e. This report e vendor and re made; this ort related to the . The original
7 AFFIDAVIT				affirm, unde le and corre		of perjury, that th	is corrected
			Check ONI I swear, or a 14th busines filed is inacc	Y if applica ffirm, that I ar day after th urate or incon	ble: n filing this le date I lea nplete. I s	corrected report no arned that the repor wear, or affirm, that led was made in goo	t as originally any error or
			Norma Cha				
AFFIX NOTARY STAMP / SI	EAL ABOVE				ature of Car	ndidate or Officeholder	
Sworn to and subscribed to certify which, witness m		fice.		this the	d	ay of	, 20 ,
Signature of officer administering oath	י Pr	inted name of officer adn	ninistering oath		Title of of	ficer administering oath	
Remem	Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections						

	OFFICEHOLDER			FORM COVER SH	л С/ОН еет рд 1
The C/OH INSTRUCTION GUI	DE explains how to complete this	s form. (Et	COUNT # nics Commission filers) 032066	2 PAGE # 2 of 95	
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRS		МІ	OFFICE U	SE ONLY
A CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	л т /ez	STATE; ZIP CODE	Date Received	
OFFICEHOLDER MAILING ADDRESS	824 Bolivia El Paso, TX 79903			Date Hand-delivered	or Date Postmarked
				Receipt #	Amount
5 CAMPAIGN TREASURER	MS/MRS/MR FIRS Mr. Craig		МІ	Date Processed	1
NAME	Nickname Las Maru	π isich	SUFFIX	Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEAS 3024 Piedmont El Paso, TX 79902-2145	E); APT / SUITE #;	CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM (915) 546-4241	IBER	EXTENSION		
8 REPORT TYPE		day before election	Runoff	appointment (of	
	July 15 8th c	day before election	Exceeded \$500 limit	Final report (Att	ach C/OH - FR)
9 PERIOD COVERED	Month Day Year 07/01/2007	THROUGH	Month Day 12/31/20	Year 07	
10 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year 03/04/2008	X Primary	Runoff	General	Special
11 OFFICE	OFFICE HELD (if any) State Representative Distric	ct 76	12 OFFICE SOUGHT (if known State Representativ) e District 76	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures a Candidates are required to disclose t				
BY OTHER INDIVIDUALS	Name				
additional pages	Address/PO Box; Apt. / Suite #; C	ity; State; Zip Code			
	1	GO TO PAGI	2		

SUPPORT & TOTALS

CANDIDATE / OFFICEHOLDER REPORT:

Austin, Texas 78711-2070

(512)463-5800

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Chave	ez, Norma (Hon.)			15 ACCOUNT #	(Ethics Commission filers)	
				00032066		
16 NOTICE FROM	candidate / officehold	tice of political contributions accep er. These expenditures may have pholders are required to report this	been made without the candidate'	s or officeholder's know	ledge or consent.	
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	GENERAL COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASUR	ER NAME			
additional pages						
		COMMITTEE CAMPAIGN TREASUR	IER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF S, LOANS, OR GUARANTEES O	\$50 OR LESS (OTHER THAN F LOANS), UNLESS ITEMIZED	\$	0.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GI	UARANTEES OF LOANS)	\$	67,620.73	
EXPENDITURE TOTALS	3 . TOTAL F	POLITICAL EXPENDITURES OF \$	50 OR LESS, UNLESS ITEMIZED	° \$	174.56	
	4. TOTAL I	POLITICAL EXPENDITURES		\$	36,538.32	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			43,916.31		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OU AY OF THE REPORTING PERIOD		\$	0.00	
18 AFFIDAVIT						
		is	swear, or affirm, under penalty true and correct and includes e under Title 15, Election Cod	all information requi		
		Ν	orma Chavez			
		-	Signature of C	andidate or Officeho	blder	
AFFIX NOTARY S	STAMP / SEAL ABOV	E				
Sworn to and subscrib	ed before me, by t	ne said		, this the	day	
	-	tify which, witness my han			,	
Signature of officer admi	nistering oath	Print name of officer a	dministering oath	Title of officer adm	inistering oath	

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/25 Report: 4/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) A&M PAC 07/02/2007 6 Contributor address; City; State; Zip Code \$500.00 Austin, TX 78768-4609 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Abrams, Jon F. 10/09/2007 Contributor address; City; State; Zip Code \$1,000.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) President J.D. Abrams Full name of contributor D out-of-state PAC (ID#_ Date In-kind contribution Amount of contribution (\$) description (if applicable) Adame, Rafael and M. Nicole Jr. 12/04/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79922 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Aguilar, Carlos 12/06/2007 Contributor address: City; State; Zip Code \$200.00 El Paso, TX 79903 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Apodaca, Gloria 11/17/2007 Contributor address; City; State; Zip Code \$75.00 El Paso, TX 79930 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Principal occupation / Job title (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 2/25 Report: 5/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Aranda, Juan Jr. 10/16/2007 **6** Contributor address: City; State; Zip Code \$50.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID# Amount of Date In-kind contribution contribution (\$) description (if applicable) AT&T PAC Fundraiser Austin Club 10/06/2007 Contributor address; City; State; Zip Code \$16.82 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Atkinson, Sylvia P (Dr.) 12/01/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79928 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Austin, David M. and Susan F. City: State: Zip Code 12/06/2007 Contributor address: \$500.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Member Austin Copelin & Reyes LLC Full name of contributor I out-of-state PAC (ID#_ C00043489) Date Amount of In-kind contribution contribution (\$) description (if applicable) Bank of America Corporation PAC 12/17/2007 Contributor address; City; State; Zip Code \$1,000.00 Atlanta, GA 30308-3615

(If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 3/25 Report: 6/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) **BG** Distribution Partners PAC 10/02/2007 **6** Contributor address; City; State; Zip Code \$500.00 Houston, TX 77040 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Bixler, Dennis J PH.D 10/18/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Blackridge Fundrasier at Austin Club 10/09/2007 Contributor address; City; State; Zip Code \$33.64 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Bowling, Robert and Joanne IV City: State: Zip Code 10/18/2007 Contributor address: \$500.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Tropicana Homes** Builder/Self Full name of contributor Dout-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Brown, Harry S 10/22/2007 Contributor address; City; State; Zip Code \$10.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 4/25 Report: 7/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Brown, J. Robert 11/23/2007 **6** Contributor address: City; State; Zip Code \$2,500.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 President Desert Eagle Distributing Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Brown, J. Robert Beer/Mojito for 12/06/07 Fundraiser 12/06/2007 Contributor address; City; State; Zip Code \$382.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) President Desert Eagle Distributing Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Caballero Governmental Affairs 10/09/2007 Contributor address; City; State; Zip Code \$100.00 Austin, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Cardwell, J. A. 10/17/2007 Contributor address: City: State: Zip Code \$1,000.00 El Paso, TX 79926 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Chairman & CEO Petro Stopping Centers Out-of-state PAC (ID#_C00039305) Full name of contributor In-kind contribution Date Amount of contribution (\$) description (if applicable) Citigroup Inc. PAC 10/09/2007 Contributor address; City; State; Zip Code \$500.00 Washington, DC 20004 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 5/25 Report: 8/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) De La Cruz, Luis H 10/17/2007 **6** Contributor address: City; State; Zip Code \$50.00 el paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Deckert, Myrna J 12/01/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) In-kind contribution Amount of contribution (\$) description (if applicable) Diamond, T.M Jr. 12/06/2007 Contributor address; City; State; Zip Code \$500.00 El Paso, TX 79922 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Self Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Diaz, Susan and Poncho 10/23/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79924 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Mulligan's Restaurant Owners Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Diaz, Susan and Poncho Catering for 12/06/07 Fundraiser 12/06/2007 Contributor address; City; State; Zip Code \$1,300.00 El Paso, TX 79924 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Owners Mulligan's Restaurant

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 6/25 Report: 9/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Duarte, Carmen 12/06/2007 6 Contributor address: City; State; Zip Code \$50.00 El Paso, TX 79903 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Dunbar, Edward W. 12/06/2007 Contributor address; City; State; Zip Code \$350.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Duron Hernandez, Marta 10/30/2007 Contributor address; City; State; Zip Code \$25.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Duron Hernandez, Marta City; State; Zip Code 11/30/2007 Contributor address: \$25.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) El Paso County Medical Society PAC 12/06/2007 Contributor address; City; State; Zip Code \$1,000.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 7/25 Report: 10/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) El Paso Sheriff's Officers Association PAC 07/27/2007 **6** Contributor address: City; State; Zip Code \$350.00 El Paso, TX 79901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) El Paso Sheriff's Officers Association PAC 10/23/2007 Contributor address; City; State; Zip Code \$2,500.00 El Paso, TX 79901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of description (if applicable) contribution (\$) EPIC \$500.00 09/20/2007 Contributor address; City; State; Zip Code El Paso, TX 79960 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) FPIC 12/06/2007 Contributor address; City; State; Zip Code \$500.00 El Paso, TX 79960 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Epperson, Irene 12/06/2007 Contributor address; City; State; Zip Code \$1,000.00 El Paso, TX 79932 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) President Jobe Inc

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 8/25 Report: 11/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Falknor, Larry or Ann 11/30/2007 **6** Contributor address; City; State; Zip Code \$100.00 el paso, TX 79903 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Amount of Date In-kind contribution contribution (\$) description (if applicable) Fernandez, Manuel D. 11/12/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of description (if applicable) contribution (\$) Foster, Paul 10/23/2007 Contributor address; City; State; Zip Code \$2,500.00 El Paso, TX 79905 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) President and CEO Western Refining Company Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Francis, L. Frederick 12/06/2007 Contributor address: City; State; Zip Code \$2,500.00 El Paso, TX 79923 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Prime Capital Management and Francis Properties CEO Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Francis, Laura E 12/02/2007 Contributor address; City; State; Zip Code \$25.00 el paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

4

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 9/25 Report: 12/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 5 Full name of contributor D out-of-state PAC (ID# Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Friends of Time Warner Cable 12/01/2007 **6** Contributor address: City; State; Zip Code \$1,000.00 Houston, TX 77040 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Gandara, Claudia 11/30/2007 Contributor address; City; State; Zip Code \$1,000.00 Socorro, TX 79927 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed Socorro Iron & Metal Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Garcia. Joe A 10/09/2007 Contributor address; City; State; Zip Code \$1,000.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Registered Lobbyist (TEC ID: 00034532) Self Employed Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Garcia, Joe A Sausage for 12/6/07 Fundraiser 12/06/2007 Contributor address: City; State; Zip Code \$292.99 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Registered Lobbyist (TEC ID: 00034532) Self Employed Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Graydon Group LLC Campaign Fundraiser at Austin Člub 10/09/2007 Contributor address; City; State; Zip Code \$16.82 Austin, TX 78701

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 10/25 Report: 13/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Gutierrez, Hector Jr. 12/06/2007 **6** Contributor address: City; State; Zip Code \$500.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) 9 El Paso Electric Co VP External Affairs Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Guzman, Ramiro 12/05/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Amount of In-kind contribution contribution (\$) description (if applicable) Guzman. Ramiro Red Bull for 12/06/07 Fundraiser 12/06/2007 Contributor address; City; State; Zip Code \$168.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Harracksing, Rachel 12/06/2007 Contributor address: City; State; Zip Code \$1,000.00 El Paso, TX 79935 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Life Ambulance Service President Full name of contributor Dout-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Hernandez, Christine K and Jose L 10/18/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 11/25 Report: 14/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Herrera, Ricardo 12/05/2007 6 Contributor address: City; State; Zip Code \$100.00 El Paso, TX 79901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Hillco PAC 10/03/2007 Contributor address; City; State; Zip Code \$1,000.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) HomePAC of Texas Texas Assn of Builders 10/09/2007 Contributor address; City; State; Zip Code \$500.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Hoy, Robert H Jr. 12/06/2007 Contributor address; City; State; Zip Code \$1,500.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Hoy Fox Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) Huerta, Arturo 10/23/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79930 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A OANC I. 95 sion filers) ntribution f applicable)

	OTHER	THAN PLEDGES OR LOAI	NS		
	The INSTRUCTION	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	2/25 Report: 15/95
2	FILER NAME	Chavez, Norma (Hon.)		3 ACCOUNT # 00032066	(Ethics Commission filers)
4	Date	5 Full name of contributor dut-of-state PAC (ID# Hughes & Luce Committe for Good Government		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/02/2007	6 Contributor address; City; State; Zip Code Dallas, TX 75201		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Hunt, W. L.	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/27/2007	Contributor address; City; State; Zip Code		\$2,500.00	l I
		El Paso, TX 79913		(If travel outside of	Texas, complete Schedule T)
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In Hunt Building C		
	Date	Full name of contributor Dout-of-state PAC (ID# IBAT PAC Independent Bankers Assn of Texas	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/18/2007	Contributor address; City; State; Zip Code		\$1,000.00	
		Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor Dout-of-state PAC (ID# Jobe, Stanley P.	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/17/2007	Contributor address; City; State; Zip Code		\$2,500.00	
		El Paso, TX 79923		(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Jobe Concrete		
	Date	Full name of contributor Dout-of-state PAC (ID# Kemp Smith	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/30/2007	Contributor address; City; State; Zip Code		\$250.00	
		El Paso, TX 79901			
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 13/25 Report: 16/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 In-kind contribution description (if applicable) contribution (\$) Kemp Smith Fundraiser Austin Club 10/06/2007 **6** Contributor address; City; State; Zip Code \$16.82 El Paso, TX 79901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Amount of Date In-kind contribution contribution (\$) description (if applicable) Kennedy, Brian P. 12/01/2007 Contributor address; City; State; Zip Code \$1,000.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) El Paso Sports Commission President & CEO Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Kirby, James 12/03/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) kuykendall, Randy 11/01/2007 Contributor address: City; State; Zip Code \$500.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) El Paso Trade School Inc CEO Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Lawson, Juan and Jene 10/20/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Electronically filed using Software Version 3.3.7

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 14/25 Report: 17/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Linebarger Goggan Blair & Sampson LLP 09/11/2007 **6** Contributor address: City; State; Zip Code \$1,000.00 Austin, TX 78760 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Lopez, Frank R 11/10/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Lowenfield, Clay 12/06/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79922 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Casa Ford Owner Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Loya, Fred 10/18/2007 Contributor address; City; State; Zip Code \$500.00 El Paso, TX 79936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Fred Loya Insurance Chairman Full name of contributor Dout-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Marquez, Sofia 11/20/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79938 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 15/25 Report: 18/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Martinez, Ernesto P. 11/05/2007 **6** Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Martinez, Graciela 12/06/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Marusich, Craig (Mr.) Campaign finance bookkeeping 12/31/2007 Contributor address; City; State; Zip Code \$1,000.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Wells Fargo & Co Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) May, Harriet 12/10/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Maynes, Cori 12/07/2007 Contributor address; City; State; Zip Code \$25.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 16/25 Report: 19/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Moreno, Narceza 12/01/2007 **6** Contributor address: City; State; Zip Code \$600.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 child care provider self Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Nickey, Laurance N M.D. 11/11/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Ochoa. Ed A. 12/06/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Parker. Les 11/20/2007 Contributor address: City; State; Zip Code \$300.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Parra, Ferando Information Technology Services 12/01/2007 Contributor address; City; State; Zip Code \$1,000.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Information Technology

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 17/25 Report: 20/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) PAyan, Andres 10/17/2007 **6** Contributor address: City; State; Zip Code \$250.00 El Paso, TX 79905 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 Payan's Tourist Service Owner Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Perez, Esther 10/31/2007 Contributor address; City; State; Zip Code \$25.00 El Paso, TX 79924 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Perry, Bob J 08/23/2007 Contributor address; City; State; Zip Code \$1,000.00 Houston, TX 77234 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) President Perry Homes Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Phillips, Jim 11/06/2007 Contributor address: City; State; Zip Code \$500.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Wells Fargo Bank Chairman/banking Full name of contributor I out-of-state PAC (ID#_ C00127779) In-kind contribution Date Amount of contribution (\$) description (if applicable) Prudential Financial Inc PAC 10/10/2007 Contributor address; City; State; Zip Code \$250.00 Newark, NJ 07102 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 18/25 Report: 21/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Redd, Ershel C Jr. 12/06/2007 **6** Contributor address; City; State; Zip Code \$250.00 Pennington, NJ 08534 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Rios, Angel M. (Dr.) 10/23/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Robles. Ramiro and Belen 12/06/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79930 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Rogers, James E Jr. 10/17/2007 Contributor address: City; State; Zip Code \$250.00 El Paso, TX 79903 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Salazar, Ann 10/19/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 19/25 Report: 22/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Salazar, R. 10/07/2007 **6** Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Salom, Jorge E Jr. 11/27/2007 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Sanderson, James \$25.00 10/20/2007 Contributor address; City; State; Zip Code El Paso, TX 79905 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Sandoval, L Carlos 12/06/2007 Contributor address: City; State; Zip Code \$250.00 El Paso, TX 79915 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Santos, Leticia 11/25/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 20/25 Report: 23/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Schwartz, Douglas A 10/22/2007 6 Contributor address; City; State; Zip Code \$250.00 El Paso, TX 79913 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Scott, Clyde E 10/31/2007 Contributor address; City; State; Zip Code \$2,500.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) VP Desert Eagle Distributing Date Full name of contributor out-of-state PAC (ID#) In-kind contribution Amount of contribution (\$) description (if applicable) Shewmaker. Suzan 12/06/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Silva, Alice 12/06/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Dout-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Snow, Ricky D 12/03/2007 Contributor address; City; State; Zip Code \$25.00 El Paso, TX 79912 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 21/25 Report: 24/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) Spencer, Joe Aureliano Jr. 12/06/2007 **6** Contributor address: City; State; Zip Code \$500.00 El Paso, TX 79902 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 Self Attorney Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) TAIFAPAC 11/28/2007 Contributor address; City; State; Zip Code \$300.00 Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) **TBA BankPAC-State** 10/09/2007 Contributor address; City; State; Zip Code \$500.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Teran. Maria 11/28/2007 Contributor address: City; State; Zip Code \$3,000.00 El Paso, TX 79922 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) President Sierra Machinery Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Terrell, Bill and April 11/01/2007 Contributor address; City; State; Zip Code \$500.00 Anthony, NM 88021 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief Admin Officer El Paso Trade School Inc

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 22/25 Report: 25/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) **Texas Architects Committee** 11/20/2007 6 Contributor address: City; State; Zip Code \$500.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Texas Automobile Dealers Association PAC 09/26/2007 Contributor address; City; State; Zip Code \$1,000.00 Austin, TX 78767 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) In-kind contribution Amount of contribution (\$) description (if applicable) Texas DenPAC \$500.00 09/25/2007 Contributor address; City; State; Zip Code Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) **Texas Gas Service PAC** City; State; Zip Code 11/27/2007 Contributor address; \$500.00 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) Texas Good Roads Transportation Assn PAC 10/09/2007 Contributor address; City; State; Zip Code \$250.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 23/25 Report: 26/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) **Texas Medical Association PAC** Fundrasier Austin Club 10/09/2007 **6** Contributor address: City; State; Zip Code \$33.64 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Amount of Date In-kind contribution contribution (\$) description (if applicable) **Texas Medical Association PAC** . 12/05/2007 Contributor address; City; State; Zip Code \$1,500.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) **Texas Our Texas PAC** 10/09/2007 Contributor address; City; State; Zip Code \$500.00 Austin, TX 78767 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor I out-of-state PAC (ID# C00199703 Date Amount of In-kind contribution contribution (\$) description (if applicable) The Glaxo Smith Kline PAC 07/17/2007 City; State; Zip Code Contributor address: \$500.00 Research Triangle Park, NC 27709 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) The Independent Insurance Agents of Texas PAC 09/13/2007 Contributor address; City; State; Zip Code \$250.00 Austin, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 24/25 Report: 27/95 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Chavez, Norma (Hon.) 00032066 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) The Independent Insurance Agents of Texas PAC 10/22/2007 **6** Contributor address: City; State; Zip Code \$250.00 Austin, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) TREPAC/Texas Assn of realtors PAC 08/03/2007 Contributor address; City; State; Zip Code \$1,000.00 Austin, TX 78767 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Trujillo, Joyce 12/06/2007 Contributor address; City; State; Zip Code \$100.00 El Paso, TX 79925 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Valero PAC 10/25/2007 Contributor address: City; State; Zip Code \$1,000.00 San Antonio, TX 78269 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Viescas, Raul Jr. 12/01/2007 Contributor address; City; State; Zip Code \$50.00 El Paso, TX 79935 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 25	/25 Report: 28/95
2	FILER NAME	Chavez, Norma (Hon.)		3 ACCOUNT # 00032066	(Ethics Commission filers)
4	Date	5 Full name of contributor D out-of-state PAC (ID# Wholesale Beer Distributors of Texas PAC	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/07/2007	6 Contributor address; City; State; Zip Code		\$500.00	
		Austin, TX 78701			Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Wright, J. T.	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/18/2007	Contributor address; City; State; Zip Code		\$2,500.00	
		El Paso, TX 79922		(If travel outside of	Texas, complete Schedule T)
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In Broker Logistics		
	Date	Full name of contributor Dout-of-state PAC (ID# Yarbrough, Erben	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/02/2007	Contributor address; City; State; Zip Code Austin, TX 78701		\$250.00	
					I Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

(512)463-5800	1-800-325-8506

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense S ing Legal Services S nse Food/Beverage Expense T Polling Expense T Printing Expense C	URE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense ravel In District ravel Out Of District Office Overhead/Rental Expense explains how to complete thi	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) s form.
1 PAGE # Schedule: 1/64 F	Report: 29/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 10/15/2007	5 Payee name Aaron Pena Campaign		
6 Amount (\$) \$100.00	7 Payee address City; State; Zip 1108 S. Closner Edinburg, TX 78539	o Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this	schedule) (b) Descriptio Donation	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought: Office held:
Date 11/19/2007	Payee name Airport Printing Service		
Amount (\$)	Payee address City; State; Zip	Code	
\$1,299.00	7 Leigh Fisher Blvd El Paso, TX 79906		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this		on (If travel outside of Texas, complete Schedule T) is for 12/7/07 Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought: Office held:
Date 11/16/2007	Payee name AMIGO'S Restaurant		
Amount (\$) \$31.87	Payee address City; State; Zip 2000 Montana Ave El Paso, TX 79903	o Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this	· · · · · · · · · · · · · · · · · · ·	on (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought: Office held:
Date 11/20/2007	Payee name AMIGO'S Restaurant		
Amount (\$) \$134.00	Payee address City; State; Zip 2000 Montana Ave El Paso, TX 79903	o Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this		n (If travel outside of Texas, complete Schedule T) In dinner meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	Electronically filed using Software Version 3.3.7

(512)463-5800	1-800-325-8506

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ntract Labor Loan Repayme ing Expense Transportation Contributions/E t Candidate/C ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Dificeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 2/64 F	eport: 30/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 08/13/2007	5 Payee name AOL		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$380.00	PO Box 1600 Ogden, UT 84401		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Annual Service Fee	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/24/2007 Amount (\$)	Apodaca, Michael Payee address City; State; Zip Code		
\$50.00	3323 Sacramento El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign Stipend/Contra	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name Apodaca, Michael		
08/13/2007 Amount (\$)	Payee address City; State; Zip Code		
\$500.00	3323 Sacramento El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign stipend/contrac	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/22/2007	Payee name Apodaca, Michael		
Amount (\$)	Payee address City; State; Zip Code		
\$100.00	3323 Sacramento El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Special State meeting/cor	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

(51

12)463-5800	1-800-325-8506

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ttract Labor Loan Repayme ing Expense Transportation Contributions/I tt Candidate/C ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 3/64 F			3 ACCOUNT # (TEC filers) 00032066
4 Date 09/10/2007	5 Payee name Apodaca, Michael		
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 3323 Sacramento El Paso, TX 79930		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Contract campaign labor	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/02/2007 Amount (\$)	Apodaca, Michael Payee address City; State; Zip Code		
\$135.00	3323 Sacremento el paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign stipend/contrac	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/12/2007 Amount (\$)	Apodaca, Michael Payee address City; State; Zip Code		
\$250.00	3323 Sacremento el paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign stipend/contrac	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/27/2007	Payee name Apodaca, Michael		
Amount (\$) \$250.00	Payee address City; State; Zip Code 3323 Sacramento El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign stipend Octobe	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

(512)463-5800 1-800-325-8506

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Food/Beverage Expense Travel Polling Expense Travel Printing Expense Office (s/Wages/Contract Labor Loan Repaym titon/Fundraising Expense Transportation In District Contributions/ Out Of District Candidate/	ent/Reimbursement n Equipment & Related Expense Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 4/64 F	eport: 32/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 11/06/2007	5 Payee name Apodaca, Michael		
6 Amount (\$) \$1,300.00	7 Payee address City; State; Zip Cod 3323 Sacremento el paso, TX 79930	le	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched	dule) (b) Description (If travel outside Contract labor for 12/06/0	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/10/2007	Payee name Apodaca, Michael		
Amount (\$) \$250.00	Payee address City; State; Zip Cod 3323 Sacramento El Paso, TX 79930	le	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	dule) Description (If travel outside Campaign stipend/contra	e of Texas, complete Schedule T) 🔲 ct labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/21/2007	Payee name Apodaca, Michael		
Amount (\$) \$250.00	Payee address City; State; Zip Cod 3323 Sacremento el paso, TX 79930	le	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	dule) Description (If travel outside Campaign stipend for Fur	e of Texas, complete Schedule T) andraiser/contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/09/2007	Payee name Applebee's		
Amount (\$) \$26.39	Payee address City; State; Zip Cod 1766 Airway Blvd El Paso, TX 79905	le	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	dule) Description (If travel outside Pct chair lunch	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		Ele	ectronically filed using Software Version 3.3.7

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800	1-800-325-8506

POLITIC	AL EXPENDITURES	SCHEDULE F
	EXPENDITURE CATEGO	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	sing Expense Transportation Equipment & Related Expense Contributions/Donations Contributions/Donations ct Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 5/64 F	eport: 33/95 2 FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC filers) 00032066
4 Date 07/20/2007	5 Payee name Art Center	
6 Amount (\$) \$43.25	7 Payee address City; State; Zip Code 3101 E Yandell el paso, TX 79903	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Framing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name AT&T	
07/13/2007 Amount (\$)	Payee address City; State; Zip Code	
\$70.74	P.O. Box 650661 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) El Paso campaign fax line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 07/25/2007	Payee name AT&T	
Amount (\$) \$50.27	Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Austin campaign fax line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 07/25/2007	Payee name AT&T	
Amount (\$) \$91.85	Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) El Paso campaign phone line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
		Electronically filed using Software Version 3.3.7

POLITICAL EXPENDITURES

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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	SCHEDULE F
E CATEGORIES	

Advertising Expe Accounting/Bank Consulting Expe Event Expense	ing Legal Services Solicitation/Fundra nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of District	rict Contributio	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/R The Instruction Guide explains how		nter a category not listed above)
1 PAGE # Schedule: 6/64 F	2 FILER NAME		3 ACCOUNT # (TEC filers) 00032066
4 Date	5 Payee name		00032000
08/27/2007	AT&T		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$92.58	P.O. Box 650661 Dallas, TX 75265		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T)
OF		El Paso campaign pho	ne line
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/27/2007	Payee name AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$56.81	P.O. Box 650661 Dallas, TX 75265		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel out Austin campaign phon	side of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/11/2007	AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$72.02	P.O. Box 650661 Dallas, TX 75265		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel out EI Paso campaign pho	side of Texas, complete Schedule T) 🔲 ne line
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/24/2007	AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$93.53	P.O. Box 650661 Dallas, TX 75265		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel out Austin campaign phon	side of Texas, complete Schedule T) 🔲 e line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITICAL EXPENDITURES

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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SCHEDULE F

EXPENDITURE CATEGORIES			
Advertising Expe Accounting/Bank Consulting Expe Event Expense	ing Legal Services Solicitation/Fundrai nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distri	ct Candid	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By late/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/Re The Instruction Guide explains how		enter a category not listed above)
1 PAGE # Schedule: 7/64 F	2 FILER NAME	•	3 ACCOUNT # (TEC filers) 00032066
4 Date	5 Payee name		00032000
09/28/2007	AT&T		
6 Amount (\$)	7 Payee address City; State; Zip Code P.O. Box 650661		
\$50.58	Dallas, TX 75265		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		tside of Texas, complete Schedule T)
OF		Austin campaign fax li	ne
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/15/2007	Payee name AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$68.91	P.O. Box 650661 Dallas, TX 75265		
BUBBOOF	Category (See Categories listed at the top of this schedule)		tside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE		Austin campaign phor	ie line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/22/2007	AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$91.85	P.O. Box 650661 Dallas, TX 75265		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel ou El Paso campaign pho	tside of Texas, complete Schedule T)
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name AT&T		
10/22/2007 Amount (\$)	Payee address City; State; Zip Code		
\$50.62	P.O. Box 650661 Dallas, TX 75265		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel ou Austin campaign phor	tside of Texas, complete Schedule T) 🔲 ne line
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Consulting Expense Event Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Polling Expense Fees Polling Expense Office Overhead/Rental Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form.			
1 PAGE # Schedule: 8/64 F			3 ACCOUNT # (TEC filers) 00032066
4 Date 11/13/2007	5 Payee name AT&T		
6 Amount (\$) \$66.21	7 Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside o Austin campaign phone line	f Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/17/2007	Payee name AT&T		
Amount (\$)	Payee address City; State; Zip Code		
\$96.92	P.O. Box 650661 Dallas, TX 75265		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o El Paso campaign phone lin	f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/01/2007	Payee name AT&T		
Amount (\$) \$50.57	Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o Austing Fax Campiagn line	f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/18/2007	Payee name AT&T		
Amount (\$) \$67.38	Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o Austin campaign fax line	f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ntract Labor Loan Repayme sing Expense Transportation Contributions/I ct Candidate/C intal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Jonations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 9/64 F	eport: 37/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/22/2007	5 Payee name AT&T		
6 Amount (\$) \$6.50	7 Payee address City; State; Zip Code P.O. Box 650661 Dallas, TX 75265		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside El Paso Campiagn fax line	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name Ay Caramba		
10/13/2007 Amount (\$)	Payee address City; State; Zip Code		
\$40.53	1926 Montana Ave El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Inform EP Constituent Bre	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/16/2007	Payee name Baby Alcapulco		
Amount (\$)	Payee address City; State; Zip Code		
\$79.84	13609 N IH 35 Austin, TX 78753		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Colleague lunch - Officeho expense	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/16/2007	Payee name Baby Alcapulco		
Amount (\$)	Payee address City; State; Zip Code		
\$63.00	13609 N IH 35 Austin, TX 78753		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign lunch	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Austin, Texas 78711-2070

POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEC		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wages/C king Legal Services Solicitation/Fundr	Contract Labor Loan Reparation Loan Reparation Contribution Contribution Candid Rental Expense OTHER (€	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee enter a category not listed above)
1 PAGE # Schedule: 10/64	Report: 38/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/12/2007	5 Payee name Baby Alcapulco		
6 Amount (\$) \$62.28	7 Payee address City; State; Zip Code 13609 N IH 35 Austin, TX 78753		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel out District issues constitu	side of Texas, complete Schedule T) ent lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/24/2007	Barnett Harley Davidson		
Amount (\$) \$250.26	Payee address City; State; Zip Code 8272 Gateway West El Paso, TX 79907		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel out Gifts; t-shirts for consti	iside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/13/2007	Payee name Bel Air High School		
Amount (\$) \$150.00	Payee address City; State; Zip Code 713 N Yarbrough El Paso, TX 79915		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel out Homecoming program	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/16/2007	Best Buy		
Amount (\$)	Payee address City; State; Zip Code		
\$20.99	9521 Viscount Blvd El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Memory card reader	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEGO	ORIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Co ing Legal Services Solicitation/Fundrai	ntract Labor Loan Repaym sing Expense Transportation Contributions, ct Candidate/ ental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 11/64			3 ACCOUNT # (TEC filers) 00032066
4 Date 10/01/2007	5 Payee name Burges Football Boosters		
6 Amount (\$) \$150.00	7 Payee address City; State; Zip Code 7800 Edgemere el paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Banner	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/03/2007 Amount (\$)	Cafe Central Payee address City; State; Zip Code		
\$55.80	109 North Oregon El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Constituent lunch on issu	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/15/2007	Payee name Camino Real Mex Am Democrats		
Amount (\$) \$200.00	Payee address City; State; Zip Code 5941 Marlin Dr el paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Annual Dues	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/02/2007	Payee name Capitol Gift Shop		
Amount (\$) \$321.51	Payee address City; State; Zip Code 1400 Congress E1.006 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Texas themed auction ite	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		El	ectronically filed using Software Version 3.3.7

Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ng Legal Services . Solicitation/Fundrais	tritact Labor sing Expense Transportation E Contributions/Do ct Candidate/Off ental Expense OTHER (enter a	t/Reimbursement quipment & Related Expense nations Made By iceholder/Political Committee category not listed above)
1 PAGE # Schedule: 12/64 4 Date 11/25/2007 6 Amount (\$) \$220.78	2 FILER NAME Chavez, Norma (Hon.) 5 Payee name Capitol Gift Shop 7 Payee address 1400 Congress E1.006 Austin, TX 78701		3 ACCOUNT # (TEC filers) 00032066
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Christmas ornaments for au Fame event (reimburse C. I	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

	Auslin, 1X 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Christmas ornaments for auction items for Hall of Fame event (reimburse C. Mata)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/18/2007	Capitol Gift Shop	
Amount (\$)	Payee address City; State; Zip Code	
\$389.70	1400 Congress E1.006 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Capital Christmas ornaments gifts for constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
07/26/2007	Capitol Grill	
Amount (\$)	Payee address City; State; Zip Code	
\$7.14	1400 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Staff Lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/03/2007	Payee name Capitol Grill	
Amount (\$)	Payee address City; State; Zip Code	
\$9.53	1400 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Staff Lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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POLITICAL EXPEN	DITURES			SCHEDU	
	EXPE	NDITURE CATEGORIES			
Accounting/Banking Legal Service	age Expense ense eense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense	OTHER (enter a ca	ipment & Related ations Made By eholder/Political C	ommittee
	I NE INSTRUCTION	GUIDE explains how to complete this	form.		
PAGE # 2	FILER NAME		3	ACCOUNT #	(TEC filers)
edule: 13/64 Report: 41/95	Chavez, Norma (H	lon.)		00032066	
Date 5 Payee name					
11/02/2007 Capitol Grill					

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Sc ise Food/Beverage Expense Tr Polling Expense Tr Printing Expense O	alaries/Wages/Contract Labor blicitation/Fundraising Expense avel In District avel Out Of District ffice Overhead/Rental Expense explains how to complete this	Transportation E Contributions/Do Candidate/Of OTHER (enter a	t/Reimbursement quipment & Related Expense nations Made By ficeholder/Political Committee category not listed above)
1 PAGE #	2 FILER NAME			3 ACCOUNT # (TEC filers)
Schedule: 13/64				00032066
4 Date	5 Payee name			00002000
11/02/2007	Capitol Grill			
	•	0		
6 Amount (\$)	7 Payee address City; State; Zip	Code		
\$16.68	1400 Congress Ave Austin, TX 78701			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this	schedule) (b) Description Staff Lund	•	f Texas, complete Schedule T)
EXPENDITURE				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:
Date	Payee name			
11/03/2007	Capitol Grill			
Amount (\$)	Payee address City; State; Zip	Code		
\$13.48	1400 Congress Ave Austin, TX 78701			
	Category (See Categories listed at the top of this	schedule) Description	(If travel outside o	f Texas, complete Schedule T)
PURPOSE		Staff Lung		
OF EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:
Date	Payee name			
09/06/2007	Carlos & Mickey's Restaurant			
Amount (\$)	•	Code		
\$39.00	1310 Magruder St El Paso, TX 79925			
PURPOSE OF	Category (See Categories listed at the top of this	schedule) Description Staff dinn		f Texas, complete Schedule T)
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:
Date	Payee name			
08/07/2007	Chavez, Norma P (Hon.)			
Amount (\$)	Payee address City; State; Zip	Code		
		0000		
\$350.00	824 Bolivia El Paso, TX 79903			
	Category (See Categories listed at the top of this	schedule) Descriptior	(If travel outside o	f Texas, complete Schedule T)
PURPOSE		Reimburs	e: food for MAD	at Norma Chavez Night
OF EXPENDITURE		at El Paso	o Diablos game o	n Schedule G
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:

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POLITICAL EXPENDITURES

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

SCHEDULE F

	EXPENDITURE CATEGO	DRIES
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais se Food/Beverage Expense Travel In District Polling Expense Travel Out Of District Printing Expense Office Overhead/Re	sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By ct Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above)
	The INSTRUCTION GUIDE explains how t	•
1 PAGE # Schedule: 14/64		3 ACCOUNT # (TEC filers) 00032066
4 Date 09/11/2007	5 Payee name Chavez, Norma P (Hon.)	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$122.00	824 Bolivia El Paso, TX 79903	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Reimbursement for staff meals on Schedule G
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/11/2007	Payee name Chavez, Norma P (Hon.)	
Amount (\$)	Payee address City; State; Zip Code	
\$50.00	824 Bolivia El Paso, TX 79903	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Reimburse for Texas Flags for constituents on Schedule G
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/09/2007	Chavez, Norma P (Hon.)	
Amount (\$)	Payee address City; State; Zip Code	
\$365.00	824 Bolivia El Paso, TX 79903	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Reimburse for Video Camera on Schedule G
EXPENDITORE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/07/2007	Payee name Chevron	
Amount (\$)	Payee address City; State; Zip Code	
\$13.07	6200 Edgemere Blvd El Paso, TX 79925	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Campaign Gasoline
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITICAL	EXPENDITURES		SCHEDULE F
	EXPE	NDITURE 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	s form.
PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salarie ing Legal Services Solicits se Food/Beverage Expense Travel Polling Expense Office	ation/Fundraising Expense Tran In District Cont Out Of District C	n Repayment/Reimbursement Isportation Equipment & Related Expense tributions/Donations Made By andidate/Officeholder/Political Committee IER (enter a category not listed above)
1 PAGE #	2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers)
Schedule: 15/64			00032066
4 Date	5 Payee name		
11/20/2007	Cinemark Theatres		
6 Amount (\$)	7 Payee address City; State; Zip Coc	de	
\$67.00	8401 Gateway West Blvd El Paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description (If trav Gift Card birthday	vel outside of Texas, complete Schedule T)
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
12/20/2007	Cinemark Theatres		
Amount (\$)	Payee address City; State; Zip Coo	de	
\$200.00	8401 Gateway West Blvd El Paso, TX 79925		
	Category (See Categories listed at the top of this sche	dule) Description (If trav	vel outside of Texas, complete Schedule T)
PURPOSE			aff (\$50 each) office staff
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/30/2007	City of Austin		
Amount (\$)	Payee address City; State; Zip Coo	le	
\$107.39	206 E Ninth St Austin, TX 78701		
PURPOSE OF	Category (See Categories listed at the top of this sche	dule) Description (If trav Austin utilities	vel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
08/27/2007	City of Austin		
Amount (\$)	Payee address City; State; Zip Coc	de la constante	
	206 E Ninth St	~~	
\$111.43	Austin, TX 78701		
PURPOSE OF	Category (See Categories listed at the top of this sche	dule) Description (If trav Austin utilities	vel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

	SCHEDULE	F
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Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundra	ontract Labor Loan Repa ising Expense Transporta Contributio ict Candida ental Expense OTHER (er	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee tter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 16/64			00032066
			00032000
4 Date 09/28/2007	5 Payee name City of Austin		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$94.81	206 E Ninth St Austin, TX 78701	_	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE		Austin utilities	_
OF			
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/29/2007	Payee name City of Austin		
Amount (\$)	Payee address City; State; Zip Code		
(1)	206 E Ninth St		
\$84.37	Austin, TX 78701		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE		Austin utilities	
OF			
EXPENDITURE			
-			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure			
to benefit C/OH			
Date	Payee name		
12/01/2007	City of Austin		
Amount (\$)	Payee address City; State; Zip Code		
\$77.30	206 E Ninth St		
* *****	Austin, TX 78701		
		Description (III)	
PURPOSE	Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T)
OF		Austin utilities	
EXPENDITURE			
_			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		g	
to benefit C/OH			
Data	Bayaa nama		
Date	Payee name		
10/17/2007	Congress Avenue Card Shop		
Amount (\$)	Payee address City; State; Zip Code		
\$45.84	615 Congress Ave		
φ40.04	Austin, TX 78701		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE		Cards for constituents	_
OF			
EXPENDITURE			
0	Condidate / Office helder regist	Office constate	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			

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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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2)463-5800	1-800-325-8506
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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEGO	RIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Cont Ing Legal Services Solicitation/Fundraisi	tract Labor Loan Repayment ng Expense Transportation Ex Contributions/Do candidate/Offi tal Expense OTHER (enter a	quipment & Related Expense
1 PAGE # Schedule: 17/64	Report: 45/95 2 FILER NAME Chavez, Norma (Hon.)	:	3 ACCOUNT # (TEC filers) 00032066
4 Date 12/13/2007	5 Payee name Continental Club		
6 Amount (\$) \$60.50	7 Payee address City; State; Zip Code 1315 South Congress Ave Austin, TX 78704	-	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Staff meeting	Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name Cooper's BBQ & Grill		
11/21/2007	Payee address City; State; Zip Code		
Amount (\$) \$32.29	2423 N Main St Junction, TX 76849		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Travel meal - to Austin	Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/31/2007	Costco		
Amount (\$) \$56.72	Payee address City; State; Zip Code 6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Office Supplies	Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
08/07/2007	Costco		
Amount (\$)	Payee address City; State; Zip Code 10401 Research Blvd		
\$55.50	Austin, TX 78759		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Capitol office beverages (re	Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fund ise Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/	Contract Labor Loan Repaym raising Expense Transportatio Contributions, strict Candidate/ /Rental Expense OTHER (enter	nent/Reimbursement n Equipment & Related Expense Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 18/64	The INSTRUCTION GUIDE explains how 2 FILER NAME Chavez, Norma (Hon.)	w to complete this form.	3 ACCOUNT # (TEC filers) 00032066
4 Date 08/20/2007	5 Payee name Costco		
6 Amount (\$) \$68.03	7 Payee address City; State; Zip Code 6101 Gateway Blvd West El Paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Office supplies	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/30/2007	Payee name Costco		
Amount (\$)	Payee address City; State; Zip Code		
\$43.50	6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Beverages for office	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/27/2007 Amount (\$)	Costco Payee address City; State; Zip Code		
\$235.25	6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Office supplies and office	e of Texas, complete Schedule T) 🔲 kitchen supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/20/2007 Amount (\$)	Costco Payee address City; State; Zip Code		
\$50.00	6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Membership renewal	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

PURPOSE

OF EXPENDITURE

Complete **ONLY** if direct expenditure to benefit C/OH

Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEGO	DRIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	Anse Gifts/Awards/Memorial Expense Salaries/Wages/Co Gifts/Awards/Memorial Expense Salaries/Wages/Co Solicitation/Fundrais Food/Beverage Expense Travel In District Polling Expense Travel Out of Distri Printing Expense Office Overhead/Re The Instruction Guibe explains how	ct Contributions ct Candidate ental Expense OTHER (ent	nent/Reimbursement n Equipment & Related Expense s/Donations Made By /Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 19/64	2 FILER NAME		3 ACCOUNT # (TEC filers) 00032066
4 Date 11/01/2007	5 Payee name Costco		
6 Amount (\$) \$305.99	 Payee address City; State; Zip Code 6101 Gateway Blvd West El Paso, TX 79925 		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsid Water beverages red bu seniors and EP Disposa	le of Texas, complete Schedule T) Il snacks poinsettas for I Strikers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/05/2007	Payee name Costco		
Amount (\$) \$230.99	Payee address City; State; Zip Code 6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Beverages for 12/06/07	le of Texas, complete Schedule T) 🔲 Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/05/2007	Payee name Costco		
Amount (\$) \$143.40	Payee address City; State; Zip Code 6101 Gateway Blvd West El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Office Supplies	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/29/2007	Payee name Cristo Rey Church		
Amount (\$) \$28.00	Payee address City; State; Zip Code 8011 Williamette Ave El Paso, TX 79907		

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POLITIC	AL EXPENDITURES				SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services	ITURE CATEGO Salaries/Wages/Con Solicitation/Fundraisi Travel In District Travel Out Of Distric Office Overhead/Rer IDE explains how to	tract Labor ing Expense t ital Expense	Transportation E Contributions/Do Candidate/Off OTHER (enter a	t/Reimbursement quipment & Related Expense nations Made By iceholder/Political Committee category not listed above)
1 PAGE # Schedule: 20/64	Report: 48/95 2 FILER NAME Chavez, Norma (Hon.	.)	-		3 ACCOUNT # (TEC filers) 00032066
4 Date 07/09/2007	5 Payee name Dallas Love Field Food & Beverage				
6 Amount (\$) \$5.56	7 Payee address City; State; 2 8008 Cedar Springs Rd Dallas, TX 75235	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of top of top of top of the top of the top of	his schedule)	(b) Description (i) Travel breakfa		f Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough	ht:	Office held:
Date 07/09/2007	Payee name Dallas Love Field Food & Beverage				
Amount (\$) \$5.56	Payee address City; State; 2 8008 Cedar Springs Rd Dallas, TX 75235	Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of	his schedule)	Description () Travel breakfa		f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht:	Office held:
Date 07/18/2007	Payee name Dallas Love Field Food & Beverage				
Amount (\$) \$13.40	Payee address City; State; 2 8008 Cedar Springs Rd Dallas, TX 75235	Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of t	his schedule)	Description () Travel breakfa		f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht:	Office held:
Date 07/01/2007	Payee name Dan's Texaco Service				
Amount (\$) \$404.86	Payee address City; State; 2 2000 S. IH 35 Austin, TX 78701	Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of the	his schedule)	Description (Repair for Car		f Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sough		Office held:
				Electr	onically filed using Software Version 3.3.7

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fun ise Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of E	s/Contract Labor Loan Repay Idraising Expense Transportation t Contributions District Candidate d/Rental Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By /Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 21/64	Report: 49/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 08/18/2007	5 Payee name Dan's Texaco Service		
6 Amount (\$) \$177.22	7 Payee address City; State; Zip Code 2000 S. IH 35 Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsid Repair for Campaign Ve	de of Texas, complete Schedule T) hicle
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/22/2007	Payee name Dan's Texaco Service		
Amount (\$) \$312.50	Payee address City; State; Zip Code 2000 S. IH 35 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Repair for Campaign Ve	de of Texas, complete Schedule T) 🔲
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/17/2007	Payee name Del Valle High School		
Amount (\$) \$100.00	Payee address City; State; Zip Code 950 Bordeaux Dr el paso, TX 79907		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Program advertising	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/06/2007	Payee name Diaz, Suzie and Poncho		
Amount (\$) \$1,282.50	Payee address City; State; Zip Code 10710 Gateway North Blvd El Paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Catering for 12/06/07 Fu	de of Texas, complete Schedule T) 🔲 Indraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEG		
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	aising Expense Transportat Contribution trict Candidar Rental Expense OTHER (er	/ment/Reimbursement ion Equipment & Related Expense ns/Donations Made By le/Officeholder/Political Committee iter a category not listed above)
1 PAGE # Schedule: 22/64			3 ACCOUNT # (TEC filers) 00032066
4 Date 07/14/2007	5 Payee name Dona Lupes Cafe		
6 Amount (\$) \$12.88	7 Payee address City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outs Constituent Breakfast n	ide of Texas, complete Schedule T) 🔲 neeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/03/2007	Payee name Dona Lupes Cafe		
Amount (\$)	Payee address City; State; Zip Code		
\$20.10	2919 Pershing Dr El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Constituent Breakfast n	ide of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/03/2007	Payee name Dona Lupes Cafe		
Amount (\$) \$40.81	Payee address City; State; Zip Code 2919 Pershing Dr El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Food for Democratic Pa	ide of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/12/2007	Payee name El Azteca Restaurant		
Amount (\$) \$46.50	Payee address City; State; Zip Code 2600 E 7th St Austin, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Staff lunch	ide of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held: Electronically filed using Software Version 3.3.7

POLITIC	AL EXPENDITURES			SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services ise Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Cor Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Rei IDE explains how t	tract Labor Lo ing Expense Tr Co t	an Repayment/Reimbursement ansportation Equipment & Related Expense nutributions/Donations Made By Candidate/Officeholder/Political Committee FHER (enter a category not listed above)
1 PAGE # Schedule: 23/64	Report: 51/95 2 FILER NAME Chavez, Norma (Hon.	.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 10/18/2007	5 Payee name El Azteca Restaurant			
6 Amount (\$) \$77.50	7 Payee address City; State; 2 2600 E 7th St Austin, TX 78702	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of top of top of top of the top of the top of	his schedule)	(b) Description (If tr Staff recognition	avel outside of Texas, complete Schedule T) dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/30/2007	Payee name El Azteca Restaurant			
Amount (\$) \$35.95	Payee address City; State; 2 2600 E 7th St Austin, TX 78702	Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of top o	his schedule)	Description (If tr Constituent lunc	avel outside of Texas, complete Schedule T) 🔲 h on Issues
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 12/13/2007	Payee name El Azteca Restaurant			
Amount (\$) \$19.00	Payee address City; State; 2 2600 E 7th St Austin, TX 78702	Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of	his schedule)	Description (If tr Staff lunch	avel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/17/2007	Payee name El Camino Real Hotel			
Amount (\$) \$10.00	Payee address City; State; 2 101 S El Paso St El Paso, TX 79901	Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of top o	his schedule)		avel outside of Texas, complete Schedule T) Deimburse A. Razani)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
				Electronically filed using Software Version 3.3.7

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense ng Legal Services ise Food/Beverage Expense Polling Expense Printing Expense	TURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense DE explains how to complete th	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) is form.
1 PAGE # Schedule: 24/64	2 FILER NAME Chavez, Norma (Hon.))	3 ACCOUNT # (TEC filers) 00032066
4 Date 07/18/2007	5 Payee name El Gallo Restaurant		
6 Amount (\$) \$54.06	7 Payee address City; State; Z 2910 South Congress Austin, TX 78704	ïp Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th		on (If travel outside of Texas, complete Schedule T) gn Dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	e sought: Office held:
Date 09/02/2007 Amount (\$)	Payee name El Paso ACLU Payee address City; State; Z	ip Code	
\$25.00	PO Box 12905 Austin, TX 78711		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th		on (If travel outside of Texas, complete Schedule T) ay Raffle Tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	e sought: Office held:
Date 09/03/2007	Payee name El Paso ACLU		
Amount (\$) \$220.00	Payee address City; State; Z PO Box 12905 Austin, TX 78711	ïp Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	<i>i</i>	on (If travel outside of Texas, complete Schedule T) ay Breakfast
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	e sought: Office held:
Date 10/02/2007	Payee name El Paso Children's Hospital		
Amount (\$) \$100.00	Payee address City; State; Z 907 Chelsea el paso, TX 79903	ïp Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	is schedule) Descripti Donatio	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	e sought: Office held:
			Electronically filed using Software Version 3.3.7

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services . Solicitation/Fundrais	ntract Labor Loan Repay sing Expense Transportation Contribution: ct Candidate ental Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By s/Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 25/64	2FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 10/22/2007	5 Payee name El Paso Democratic Party		
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 1300 Montana El Paso, TX 79902		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsic 2007 Golf Tournament I	de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name El Paso Democratic Party		
12/06/2007 Amount (\$)	Payee address City; State; Zip Code		
\$750.00	1300 Montana El Paso, TX 79902		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Filing Fee	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/14/2007 Amount (\$)	El Paso Diablos Payee address City; State; Zip Code		
\$1,350.00	9700 Gateway Blvd North el paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Sponsor Military Night	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/29/2007	Payee name El Paso Police Foundation		
Amount (\$) \$15.00	Payee address City; State; Zip Code PO Box 972921 el paso, TX 79907		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Donation	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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512)463-5800	1-800-325

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Advantising Expense Accounting Expense Press EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Press Loan Repayment/Reimbursement Trapportation Expense Printing Expense Print Expense Printing Expense Printing Expense Printing Expense Pr	F
Schedule: 26/64 Report: 54/95 Chavez, Norma (Hon.) 00032066 4 Date 5 Payee name EI Paso Times 6 Amount (\$) 7 Payee address City; State; Zip Code § 8 Fumes Plaza EI Paso, TX 79901 (b) Description (If travel outside of Texas, complete Schedule 1 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule 1 9 Complete ONLY if driver expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: 12/05/2007 Enchanted Florist Amount (\$) Payee address City; State; Zip Code 1616 Lavaca Street Austin, TX 78701 PURPOSE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule 1 6 Fielder Payee name Fielder Payee address City; State; Zip Code 12/05/2007 Enchanted Florist Austin, TX 78701 Description (If travel outside of Texas, complete Schedule 1 Fielder Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule 1 Fielder Category	ittee
12/12/2007 El Paso Times 6 Amount (\$) 7 Payee address City; State; Zip Code \$85.44 Times Plaza El Paso, TX 79901 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: 12/205/2007 Payee name Enchanted Florist Amount (\$) Payee address City; State; Zip Code \$46.03 Category (See Categories listed at the top of this schedule) Office sought: Office held: bate Payee name Enchanted Florist Payee address City; State; Zip Code \$46.03 1616 Lavaca Street Austin, TX 78701 Description (If travel outside of Texas, complete Schedule 1 PURPOSE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule 1 Flowers for Austin Fundrasier (reimburse A. Razating the benefit C/OH Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule 1 Flowers for Austin Fundrasier (reimburse A. Razating the benefit C/OH Category (See Categories listed at the top of this schedule) Description (If travel outsi	C filers)
\$85.44 Times Plaza El Paso, TX 79901 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T 6 month subscription newspaper 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date 12/05/2007 Payee name Enchanted Florist Payee address City; State; Zip Code Amount (\$) \$46.03 Payee address City; State; Zip Code Description (If travel outside of Texas, complete Schedule T Flowers for Austin Fundrasier (reimburse A. Razai Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name	
PURPOSE OF EXPENDITURE 6 month subscription newspaper 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date Payee name 12/05/2007 Enchanted Florist Amount (\$) Payee address City; State; Zip Code Amount (\$) Payee address City; State; Zip Code 1616 Lavaca Street Austin, TX 78701 Description (If travel outside of Texas, complete Schedule T Flowers for Austin Fundrasier (reimburse A. Razat Complete ONLY if direct expenditure to benefit C/OH	
direct expenditure to benefit C/OH Payee name Date 12/05/2007 Payee name 12/05/2007 Enchanted Florist Amount (\$) Payee address City; State; Zip Code \$46.03 1616 Lavaca Street Austin, TX 78701 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule 1 Flowers for Austin Fundrasier (reimburse A. Razat Girect expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:	ıle T) 🔲
12/05/2007 Enchanted Florist Amount (\$) Payee address City; State; Zip Code \$46.03 1616 Lavaca Street Austin, TX 78701 PURPOSE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule Texas, comp	
Amount (\$) Payee address City; State; Zip Code \$46.03 1616 Lavaca Street Austin, TX 78701 1616 Lavaca Street Austin, TX 78701 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T Flowers for Austin Fundrasier (reimburse A. Razar Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:	
\$46.03 1616 Lavaca Street Austin, TX 78701 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T Flowers for Austin Fundrasier (reimburse A. Razar Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:	
PURPOSE OF EXPENDITURE Flowers for Austin Fundrasier (reimburse A. Razar Flowers for Austin Fundrasier (reimburse A. Razar Gomplete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought:	
direct expenditure to benefit C/OH	·
Date Payee name	
08/30/2007 Enterprise Rent a Car	
Amount (\$)Payee addressCity;State;Zip Code\$305.006200 S IH 35 Austin, TX 78705	
PURPOSE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T OF EXPENDITURE Car rental expense in Austin TX	ıle T) 🔲
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:	
DatePayee name09/06/2007Enterprise Rent a Car	
Amount (\$)Payee addressCity; State; Zip Code\$76.016200 S IH 35 Austin, TX 78705	
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T Car rental expense in Austin	ıle T) 🔲
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Electronically filed using Software Versi	loroice 0.0

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PURPOSE OF EXPENDITURE

Complete **ONLY** if direct expenditure to benefit C/OH

Candidate / Officeholder name

Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundraising Expense Transportation se Food/Beverage Expense Travel In District Contribution Polling Expense Travel Out Of District Candidate	ment/Reimbursement on Equipment & Related Expense s/Donations Made By s/Officeholder/Political Committee er a category not listed above)
1 PAGE #	2 FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC filers)
Schedule: 27/64	S Payee name	00032066
4 Date 09/14/2007	Enterprise Rent a Car	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$138.98	6200 S IH 35 Austin, TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)(b) Description (If travel outside Car rental expense in All Car re	de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date	Payee name	
09/27/2007	Enterprise Rent a Car	
Amount (\$) \$79.87	Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description (If travel outsic Car rental expense in Ar	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date	Payee name	
09/29/2007	Enterprise Rent a Car	
Amount (\$) \$79.87	Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description (If travel outsid Car rental expense in Al	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date	Payee name	
10/05/2007	Enterprise Rent a Car	
Amount (\$)	Payee address City; State; Zip Code 6200 S IH 35	
\$51.44	Austin, TX 78705	

Office sought:

Electronically fi	led using	Software	Version 3	3.3.7

Office held:

POLITICAL EXPENDITURES

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

1-800-325-8506 (512)463-5800

SCHEDULE F

Advertising Expe		ontract Labor Loan Repaym	ent/Reimbursement
Accounting/Bank Consulting Expe		ising Expense Transportation	Equipment & Related Expense Donations Made By
Event Expense	Polling Expense Travel Out Of Distr	ict Candidate/0	Officeholder/Political Committee
Fees	Printing Expense Office Overhead/R	1 (a category not listed above)
	The INSTRUCTION GUIDE explains how	to complete this form.	
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 28/64	Report: 56/95 Chavez, Norma (Hon.)		00032066
4 Date	5 Payee name		
10/11/2007	Enterprise Rent a Car		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$84.98	6200 S IH 35		
\$0.000	Austin, TX 78705		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		Car rental expense in Aus	stin
OF EXPENDITURE			
EXPENDITORE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		-	
to benefit C/OH			
Date	Payee name		
10/22/2007	Enterprise Rent a Car		
Amount (\$)	Payee address City; State; Zip Code		
\$366.28	6200 S IH 35		
* • • • •	Austin, TX 78705		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE OF		Car rental expense in Aus	stin
EXPENDITURE			
_			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
11/03/2007	Enterprise Rent a Car		
Amount (\$)	Payee address City; State; Zip Code		
\$124.28	6200 S IH 35 Austin, TX 78705		
		Description (If travel subside	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Car rental expense in Aus	of Texas, complete Schedule T)
OF		Car rentar expense in Aus	500
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		Onice sought.	Office field.
to benefit C/OH			
Date	Payee name		
11/09/2007	Enterprise Rent a Car		
Amount (\$)	Payee address City; State; Zip Code		
\$264.96			
φ204.30	Austin, TX 78705		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		Car rental expense in EP	
OF EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		~	
to benefit C/OH			

POLITICAL EXPENDITURES

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

(312)+03-3000	1-000-020-0000
SCH	EDULE F

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundrai	Intract Labor Loan Repay sing Expense Transportati Contribution: ict Candidate ental Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By e/Officeholder/Political Committee er a category not listed above)
1 PAGE #	2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers)
Schedule: 29/64 4 Date	5 Payee name		00032066
11/15/2007	Enterprise Rent a Car		
6 Amount (\$) \$42.49	7 Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsic Car rental expense in Au	de of Texas, complete Schedule T) 🔲 ustin
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/29/2007	Payee name Enterprise Rent a Car		
Amount (\$)	Payee address City; State; Zip Code		
\$127.48	6200 S IH 35 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Car rental expense in Au	de of Texas, complete Schedule T) 🔲 ustin
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/05/2007	Enterprise Rent a Car		
Amount (\$) \$84.98	Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Car rental expense in Au	de of Texas, complete Schedule T) 🔲 ustin
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/07/2007	Payee name Enterprise Rent a Car		
Amount (\$) \$139.52	Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Car rental expense in Au	de of Texas, complete Schedule T) ustin TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	Contract Labor Loan Repay aising Expense Transportati Contribution trict Candidat Rental Expense OTHER (en	rment/Reimbursement ion Equipment & Related Expense is/Donations Made By e/Officeholder/Political Committee ter a category not listed above)
1 PAGE # Schedule: 30/64	Report: 58/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/13/2007	5 Payee name Enterprise Rent a Car		
6 Amount (\$) \$127.48	7 Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsi Car rental expense in A	de of Texas, complete Schedule T) 🔲 ustin TX
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/20/2007	Payee name Enterprise Rent a Car		
Amount (\$) \$66.77	Payee address City; State; Zip Code 6200 S IH 35 Austin, TX 78705		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi Car rental expense in A	de of Texas, complete Schedule T) 🔲 ustin TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/06/2007	Payee name Ernie's Cafe		
Amount (\$) \$20.30	Payee address City; State; Zip Code 6858 Industrial El Paso, TX 79915		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi Constituent lunch	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/03/2007	Payee name Federal Express		
Amount (\$) \$139.00	Payee address City; State; Zip Code 327 Congress Ave Ste 100 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi Shipping/postage exper	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
			Electronically filed using Software Version 3.3.7

(512)463-

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services se Food/Beverage Expense Polling Expense Printing Expense The Instruction Guit	TURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense De explains how to complete t	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) his form.
1 PAGE # Schedule: 31/64	2 FILER NAME Chavez, Norma (Hon.))	3 ACCOUNT # (TEC filers) 00032066
4 Date 10/08/2007	5 Payee name FTD Florist		·
6 Amount (\$) \$74.96	7 Payee address City; State; Z Nationwide web address El Paso, TX 79905	'ip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th		ion (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Offic	e sought: Office held:
Date 10/02/2007	Payee name GeoGeske		
Amount (\$) \$84.69	Payee address City; State; Z 2701 N Stanton el paso, TX 79902	ïp Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	is schedule) Descript Staff Me	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Offic	e sought: Office held:
Date 10/08/2007	Payee name Grand Asian Buffet		
Amount (\$) \$74.96	Payee address City; State; Z 9505 Viscount Blvd B El Paso, TX 79925	ïp Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	is schedule) Descript Staff lui	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Offic	e sought: Office held:
Date 10/23/2007	Payee name Grand Asian Buffet		
Amount (\$) \$38.08	Payee address City; State; Z 9505 Viscount Blvd B El Paso, TX 79925	ip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th		ion (If travel outside of Texas, complete Schedule T) gn Fundraiser volunteer planning meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Offic	e sought: Office held: Electronically filed using Software Version 3.3.7

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SCHEDULE	
SCHEDULE	

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services . Solicitation/Fundra	ontract Labor Loan Repaym aising Expense Transportation Contributions, rict Candidate/ kental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 32/64	Report: 60/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 11/09/2007	5 Payee name Greater El Paso Chamber of Commerce		
6 Amount (\$) \$150.00	 Payee address City; State; Zip Code 10 Civic Center Plaza el paso, TX 79901 		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Annual Membership Due	e of Texas, complete Schedule T) 🔲 S
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/10/2007	Payee name Greater El Paso Chamber of Commerce		
Amount (\$)	Payee address City; State; Zip Code		
\$500.00			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Hall of Fame Banquet tak	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/15/2007	Greater El Paso Chamber of Commerce		
Amount (\$)	Payee address City; State; Zip Code		
\$64.00	10 Civic Center Plaza el paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Signs for Vetern's Day Pa	e of Texas, complete Schedule T) 🔲 arade
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 07/15/2007	Payee name Harlon's BBQ		
Amount (\$)	Payee address City; State; Zip Code		
\$20.49	11403 MLK Houston, TX 77048		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside travel lunch - to Austin	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEG	ORIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Co ing Legal Services Solicitation/Fundra	ontract Labor Loan Repayn ising Expense Transportatio Contributions ict Candidate ental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By /Officeholder/Political Committee rr a category not listed above)
1 PAGE # Schedule: 33/64	Report: 61/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/09/2007	5 Payee name Hector Bernal Campaign		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$100.00	500 E San Antonio El Paso, TX 79901		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsid Donation	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/23/2007 Amount (\$)	Holy Light Church Payee address City; State; Zip Code		
\$50.00	5928 Trowbridge El Paso, TX 79905		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Building Fund Donation	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/24/2007	Payee name Holy Light Church		
Amount (\$) \$100.00	Payee address City; State; Zip Code 5928 Trowbridge El Paso, TX 79905		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Choir Ministry Donation	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/15/2007	Payee name Holy Light Church		
Amount (\$) \$100.00	Payee address City; State; Zip Code 5928 Trowbridge El Paso, TX 79905		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Youth Ministiy Donation	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held: lectronically filed using Software Version 3.3.

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800	1-800-325-8506
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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEGO	-	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais	ing Expense Transportation Contributions t Candidate ntal Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By /Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 34/64	2FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 10/09/2007	5 Payee name House Democratic Campaign Committee		
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code P.O. Box 1925 Austin, TX 78767		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsic Donation for BAD Presic	de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 07/21/2007	Payee name Jaxon's		
Amount (\$)	Payee address City; State; Zip Code		
\$35.74	1135 Airway Blvd El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Campaign Meal - Obam	de of Texas, complete Schedule T) 🔲 a Rally
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/04/2007 Amount (\$)	Jefferson High School Football Boosters Club Payee address City; State; Zip Code		
\$100.00	4700 Alameda Ave el paso, TX 79905		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Donation	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/11/2007	Payee name Jesus R Herrera Campaign		
Amount (\$) \$100.00	Payee address City; State; Zip Code 6021 Palo Alto Ave El Paso, TX 79912		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Contribution	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrai	ntract Labor Loan Repayn sing Expense Transportatio Contributions ct Candidate ental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 35/64	Report: 63/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 11/02/2007	5 Payee name JFK School of Government		
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 79 JFK Street Cambridge, MA 02138		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsid Alumni Sustaining Memb	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 07/04/2007	Payee name Juan In A Million		
Amount (\$) \$17.83	Payee address City; State; Zip Code 2300 E Cesar Chavez St 1 Austin, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Staff lunch	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 08/14/2007	Payee name L&J Cafe		
Amount (\$) \$42.16	Payee address City; State; Zip Code 3622 E Missouri El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Campaign lunch	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/19/2007	Payee name L&J Cafe		
Amount (\$) \$13.54	Payee address City; State; Zip Code 3622 E Missouri El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Staff Lunch meeting	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		E	ectronically filed using Software Version 3.3.7

(512)463

-5800	1-800-325-8506

POLITIC	AL EXPENDITURES			SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ng Legal Services se Food/Beverage Expense Polling Expense Printing Expense The Instructio	ENDITURE CATEGOR Salaries/Wages/Cont Solicitation/Fundraisin Travel In District Travel Out Of District Office Overhead/Ren N GUIDE explains how to	ract Labor Loan Rep ng Expense Transport Contributi tal Expense OTHER (ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By late/Officeholder/Political Committee enter a category not listed above)
1 PAGE #	2 FILER NAME Chavez, Norma	(Hon.)		3 ACCOUNT # (TEC filers) 00032066
Schedule: 36/64 4 Date 10/23/2007	5 Payee name L&J Cafe	(,		00032088
6 Amount (\$) \$23.73	7 Payee address City; Sta 3622 E Missouri El Paso, TX 79903	te; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Description (If travel ou Staff Lunch meeting	tside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 12/19/2007	Payee name L&J Cafe			
Amount (\$)		te; Zip Code		
\$25.96	3622 E Missouri El Paso, TX 79903			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the to	op of this schedule)	Description (If travel ou Demo Pct Chair Camp	tside of Texas, complete Schedule T) Daign lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/19/2007	Payee name L&T Market			
Amount (\$) \$100.54	Payee address City; Sta 3325 Ranch Road 620 Austin, TX 78738	te; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the to	op of this schedule)		tside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 12/18/2007	Payee name La Fe			
Amount (\$) \$100.00	Payee address City; Sta 1505 Mescalero Dr El Paso, TX 79925	te; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the to	op of this schedule)	Description (If travel ou Christian Project Dona	tside of Texas, complete Schedule T) 🔲 ation
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held: Electronically filed using Software Version 3.3.7

Austin, Texas 78711-2070

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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.					

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services . Solicitation/Fundr	Contract Labor Loan Repa aising Expense Transporta Contributio trict Candida Rental Expense OTHER (ei	nyment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee nter a category not listed above)
1 PAGE #	2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
Schedule: 37/64 4 Date	5 Payee name		00032000
11/19/2007	La Mexicana Bakery		
6 Amount (\$) \$20.29	7 Payee address City; State; Zip Code 1924 South 1st St Austin, TX 79904		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T) meeting: snacks for breakfast
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/24/2007 Amount (\$)	Lin's Grand Buffet Payee address City; State; Zip Code		
\$23.34	Gateway East El Paso, TX 79915		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Staff Lunch	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/23/2007	Lone Star Cab Co		
Amount (\$) \$26.45	Payee address City; State; Zip Code 208 West Powell Lane Austin, TX 78753		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Cab Fare	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/03/2007	Payee name Luby's		
Amount (\$)	Payee address City; State; Zip Code		
\$20.09	1010 Chelsea El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Lunch meeting for Can	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fu ise Food/Beverage Expense Travel In Distr Polling Expense Travel Out Of	es/Contract Labor Loan Repayr Indraising Expense Transportatic ict Contributions District Candidate ad/Rental Expense OTHER (entr	nent/Reimbursement n Equipment & Related Expense //Donations Made By /Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 38/64	Report: 66/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 09/18/2007	5 Payee name LULAC District IV		
6 Amount (\$) \$20.00	7 Payee address City; State; Zip Code 1501 Arizona Ave el paso, TX 79902		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsic Judge Armendariz Rece	le of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/20/2007	Payee name Macy's		
Amount (\$) \$100.00	Payee address City; State; Zip Code 8401 Gateway West Blvd El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic 4 Gift Cards (\$25 each)	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/04/2007	Payee name Mars Restaurant		
Amount (\$) \$121.22	Payee address City; State; Zip Code 1400 S Congress Austin, TX 78704		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Staff dinner	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 07/10/2007	Payee name Mata, Cassandra		
Amount (\$) \$200.00	Payee address City; State; Zip Code 1210 Echo Lane Austin, TX 78745		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsic Campaign travel stipend	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		E	lectronically filed using Software Version 3.3.7

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2)463-5800	1-800-325-8506

Schedule: 398-4 Peperf: 57/95 Chavez, Norma (Hon.) 00032066 4 Dite 5 Prevenance 00032066 5 Fargenance City: State: Zip Code 1210 5/2007 6 Amount (\$) 7 Payee address City: State: Zip Code 9 Comptoe ONLYIF Candidate / Office holder name Office sought: Office held: 9 Comptoe ONLYIF Candidate / Office holder name Office sought: Office held: 9 Orgenes ONLYIF Candidate / Officeholder name Office sought: Office held: 9 Orgenes ONLYIF Candidate / Officeholder name Office sought: Office held: 9 Orgenes ONLYIF Candidate / Officeholder name Office sought: Office held: 9 Orgenes ONLYIF Candidate / Officeholder name Office sought: Office held: 0 Candidate / Officeholder name Office sought: Office held: Office held: 0 Candidate / Officeholder name Office sought: Office held: Office held: 0 Candi	POLITIC	AL EXPENDITURES		SCHEDULE F
Schedule: 39:64 Report: 67/95 Chavez, Norma (Hon.) 00032066 Date	Accounting/Bank Consulting Exper Event Expense	nse Gifts/Awards/Memorial Expense Salaries/Wages/Con ng Legal Services Solicitation/Fundrais ise Food/Beverage Expense Travel In District Polling Expense Office Overhead/Rer	tract Labor Loan Repayme ing Expense Transportation Contributions/D t Candidate/O ntal Expense OTHER (enter	Equipment & Related Expense Ionations Made By Ifficeholder/Political Committee
12/20/5/2007 Mate. Cassandra 6 Amount (\$) 7 Payce address City: State: Zip Code 12/10 Echo Lane Austin, TX 78745 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) Contract labor 9 complete ONLVT Candidate / Officeholder name Office sought: Office held: 9 complete ONLVT Candidate / Officeholder name Office sought: Office held: 9 complete ONLVT Payce adress City: State: Zip Code 2231 Wyoning 9 complete ONLVT Payce adress City: State: Zip Code 2231 Wyoning 9 categories ONLVT Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Camplete ONLVT Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Camplete ONLVT Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)	1 PAGE # Schedule: 39/64			• • • • • •
\$150.00 1210 Echo Lane Austin, TX 78745 8 PURPOSE EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) _ contract labor 9 Complete ONLY if direct expenditure to benefit COH Category (See Categories listed at the top of this schedule) Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit COH Payee name Office held: Office held: 9 Complete ONLY if direct expenditure to benefit COH Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Carnino Real Mex Am Democrats 9 Complete ONLY if direct expenditure to benefit COH Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) 0 Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) 0 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) 0 Atterno Macca LTD Amount (S) Payee name 0 Add out / Office hold: Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) 0 Tate <t< td=""><td>•</td><td></td><td></td><td></td></t<>	•			
PURPOSE Greater powniting index operating based COAL (add table / Officeholder name Contract labor 9 Complete ONLY if (direct operating based COAL (SS 0.00) Candidate / Officeholder name Office sought: Office held: Amount (\$) Payee name 03/29/2007 McCall Center Payee address 3231 Wyoming EI Paso, TX 79303 Description (if travel outside of Texas, complete Schedule T) Carnino Real Mex Am Democrats PURPOSE EXPENDITURE Catagory (See Categories listed at the top of this schedule) Description (if travel outside of Texas, complete Schedule T) Carnino Real Mex Am Democrats 03/29/2007 Payee name 09/29/2007 Payee name 09/29/2007 Office held: 03/29/2007 Payee name 09/29/2007 Payee name 09/29/2007 Office held: 03/29/2007 Payee name 09/29/2007 Payee name 09/29/2007 Office held: 03/29/2007 Payee name 09/29/2007 Payee name 01/2 recter powniture 0 senset 100H Category (See Categories listed at the top of this schedule) Description (if travel outside of Texas, complete Schedule T) Gift for Austin Staffer PURPOSE OF EXPENDITURE Candidate / Officeholder name 10/13/2007 Office sought: Mexican American Legislative Caucus Amount (\$) Payee name Mexican American Legislative Caucus Amount (\$) Description Mexican American Legislative Caucus Amount (\$) Description M	6 Amount (\$) \$150.00	1210 Echo Lane		
direct expenditure to benefit COV Payee name Date 09/29/2007 McCall Center Amount (5) \$50.00 Payee address 2231 Wyoming EI Paso, TX 79003 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Carrino Real Mex Am Democrats PURPOSE EXPENDTURE Candidate / Officeholder name Office sought: Office held: Complete ONLY // direct expenditor Payee name Office sought: Office held: Date 08/29/2007 Payee name Office sought: Office held: Date 08/29/2007 Payee name Office sought: Office held: Office Sought Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Gardidate / Officeholder name Office sought: Office held: Image: Category (See Categories listed at the top of this schedule) PURPOSE EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Office sought: Office held: Office held: Office held: Office sought: Office held Office held: Image: Category (See Categories listed at the top of this schedule) PURPOSE EXPENDITURE Ca	OF	(a) Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
09/29/2007 McCall Center Amount (\$) Payee address City; State; Zip Code \$50.00 \$231 Wyoming EI Paso, TX 79903 Description (It ravel outside of Texas, complete Schedule T) Camino Real Mex Am Democrats PURPOSE or excendition expendition Category (See Categories listed at the top of this schedule) Description (It ravel outside of Texas, complete Schedule T) Camino Real Mex Am Democrats Complete ONLY it direct expendition Candidate / Officeholder name Office sought: Office held: Office Sought: Payee name 08/29/2007 Macca LTD Payee address City; State; Zip Code Description (It ravel outside of Texas, complete Schedule T) Sunland Park, NM 88011 PURPOSE expendition City Category (See Categories listed at the top of this schedule) Description (It ravel outside of Texas, complete Schedule T) Gift for Austin Staffer Complete ONLY it direct expendition to benefit CiOH Category (See Categories listed at the top of this schedule) Description (It ravel outside of Texas, complete Schedule T) Gift for Austin Staffer Complete ONLY it direct expendition Complete ONLY it direct expendition Payee address City; State; Zip Code 1005 Congress Ave STE 1020 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (It ravel outside of Texas, complete Schedule T), Membership dues <	direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
\$50.00 3231 Wyoning El Paso, TX 79903 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Camino Real Mex Am Democrats Complete ONLY If obsendit C/OH Candidate / Officeholder name Office sought: Office held: Date 08/29/2007 Payee name Mecca LTD Office sought: Office held: Amount (\$) 1 Ardovino Dr Sunland Park, NM 88011 Description (If travel outside of Texas, complete Schedule T) Gift for Austin Staffer Complete ONLY If direct expenditure to benefit C/OH Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Gift for Austin Staffer Complete ONLY If direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date Office Sought: Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Gift for Austin Staffer I Complete ONLY If direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date D/13/2007 Payee address City; State; Zip Code 1005 Congress Ave STE 1020 Austin, TX 78701 Description (If travel outside of Texas, complete Schedule T) Membership dues Complete ONLY If direct expe				
PURPOSE OF EXPENDITURE Camino Real Mex Am Democrats Complete ONLY if direct expenditure to benefit COHH Candidate / Officeholder name Office sought: Office held: Date 08/29/2007 Payee name Mecca LTD Payee datress City; State; Zip Code 1 Amount (\$) Payee address City; State; Zip Code 1 Ardovino Dr Sunland Park, NM 88011 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If ravel outside of Texas, complete Schedule T) Gift for Austin Staffer Complete ONLY if direct expenditure to benefit COHH Candidate / Officeholder name Office sought: Office held: Date Payee name 10/13/2007 Payee name Mexican American Legislative Caucus Office sought: Office held: Amount (\$) Payee address City; State; Zip Code 1005 Congress Ave STE 1020 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Membership dues PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Membership dues Complete ONLY if direct expenditure to benefit COHH Category (See Categories listed at the top of this schedule) Description (If travel outside of		3231 Wyoming		
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08/29/2007 Mecca LTD Amount (\$) Payee address City; State; Zip Code \$93.98 1 Ardovino Dr Sunland Park, NM 88011 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) [Gift for Austin Staffer Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date 10/13/2007 Payee name Mexican American Legislative Caucus Mexican American Legislative Caucus Mexican American Legislative Caucus Amount (\$) Payee address City; State; Zip Code 1005 Congress Ave STE 1020 Austin, TX 78701 Description (If travel outside of Texas, complete Schedule T) [Membership dues PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) [Membership dues	direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
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PURPOSE OF EXPENDITURE Gift for Austin Staffer Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held: Date 10/13/2007 Payee name Mexican American Legislative Caucus Office sought: Office held: Amount (\$) Payee address City; State; Zip Code 1005 Congress Ave STE 1020 Austin, TX 78701 Description (If travel outside of Texas, complete Schedule T) Membership dues PURPOSE EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Membership dues Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:		1 Ardovino Dr		
direct expenditure to benefit C/OH Payee name Date Payee name 10/13/2007 Mexican American Legislative Caucus Amount (\$) Payee address \$300.00 1005 Congress Ave STE 1020 Austin, TX 78701 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Membership dues Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office held:	OF	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
10/13/2007 Mexican American Legislative Caucus Amount (\$) Payee address City; State; Zip Code \$300.00 1005 Congress Ave STE 1020 Austin, TX 78701 Description (If travel outside of Texas, complete Schedule T) Membership dues PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Membership dues Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought:	direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
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PURPOSE OF EXPENDITURE Membership dues Complete ONLY if direct expenditure to benefit C/OH Candidate / Office holder name Office sought: Office held:	(, ,	1005 Congress Ave STE 1020		
direct expenditure to benefit C/OH	OF	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
	direct expenditure	Candidate / Officeholder name		

Austin, Texas 78711-2070

POLITIC	AL EXPE	NDITURES				SCHEDU	ILE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	king Legal S nse Food/Bo Polling	vards/Memorial Expense ervices everage Expense Expense Expense	Solicitation/Fun Travel In Distric Travel Out Of E Office Overhea	s/Contract Labor Idraising Expense ct	Transportation E Contributions/Do Candidate/Off OTHER (enter a	t/Reimbursement quipment & Related nations Made By ficeholder/Political C category not listed a	ommittee
PAGE # nedule: 40/64	Report: 68/95	2 FILER NAME Chavez, Norma (Ho	on.)			3 ACCOUNT # 00032066	(TEC filers)
Date 12/10/2007	5 Payee name Miguel Tera	n Campaign					
Amount (\$) \$150.00	7 Payee addres 500 E San A 301 El Paso, TX	Antonio	Zip Code				
PURPOSE OF (PENDITURE	(a) Category (Se	e Categories listed at the top o	of this schedule)	(b) Description Donation	(If travel outside o	f Texas, complete S	chedule T)
omplete ONLY if rect expenditure benefit C/OH	Candidate / C	Officeholder name		Office so	ught:	Office held:	

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services ise Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract Solicitation/Fundraising E Travel In District Travel Out Of District Office Overhead/Rental E DE explains how to co	xpense Transpor Contribut Candie Expense OTHER	payment/Reimbursement tation Equipment & Related Expense tions/Donations Made By date/Officeholder/Political Committee (enter a category not listed above)
1 PAGE #	2 FILER NAME			3 ACCOUNT # (TEC filers)
Schedule: 40/64	Report: 68/95 Chavez, Norma (Hon.)		00032066
4 Date	5 Payee name			
12/10/2007	Miguel Teran Campaign			
6 Amount (\$)	7 Payee address City; State; Z	Zip Code		
\$150.00	500 E San Antonio			
	301 El Paso, TX 79901			
8 PURPOSE OF	(a) Category (See Categories listed at the top of the	iis schedule) (b)	Description (If travel or Donation	utside of Texas, complete Schedule T)
EXPENDITURE				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	I	Office sought:	Office held:
Date	Payee name			
10/03/2007	Monteleone's Ristorante			
Amount (\$)	Payee address City; State; Z	Zip Code		
\$25.28	3023 Gateway Blvd W El Paso, TX 79903			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	iis schedule)	Description (If travel or Constituent Lunch me	utside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name			
07/12/2007	Moonshine Patio Bar & Grill			
Amount (\$)	Payee address City; State; Z	Zip Code		
\$58.47	303 Red River St Austin, TX 78701			
PURPOSE	Category (See Categories listed at the top of the	iis schedule)	Description (If travel or Campaign meeting m	utside of Texas, complete Schedule T)
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	I	Office sought:	Office held:
Date	Payee name			
12/05/2007	Mulligan's North			
Amount (\$)	Payee address City; State; Z	Zip Code		
\$35.12	10710 Gateway North El Paso, TX 79924			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th	iis schedule)	Description (If travel or Campaign Fundraise	utside of Texas, complete Schedule T) r planning meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	I	Office sought:	Office held:

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES	SCHEDULE F
	EXPENDITURE CATEGO	RIES
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Con ing Legal Services Solicitation/Fundraisi	tract Labor Loan Repayment/Reimbursement ing Expense Transportation Equipment & Related Expense contributions/Donations Made By candidate/Officeholder/Political Committee ntal Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 41/64	Report: 69/95 2 FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC filers) 00032066
4 Date 11/02/2007	5 Payee name NALEO (National Association of Latino/a Elected Offici	als)
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 1122 West Washington Blvd 3rd floor Los Angeles, CA 90015	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Membership dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
07/09/2007	Obama 4 America	
Amount (\$) \$69.00	Payee address City; State; Zip Code PO Box 8102 Chicago, IL 60680	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) T-shirts and Pins
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/07/2007	Payee name Office Depot	
Amount (\$) \$55.21	Payee address City; State; Zip Code 2101 S Lamar Blvd Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Office supplies: flash drives (reimburse C. Mata)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/27/2007	Payee name Office Depot	
Amount (\$) \$300.90	Payee address City; State; Zip Code 1111 Geronimo El Paso, TX 79925	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Toner laser printer and 1 yr warrenty
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
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POLITICAL EXPENDITURES

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	SCH	HEDULE F

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 Out Of 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)					
1 PAGE #	2 FILER NAME	:	3 ACCOUNT # (TEC filers)		
Schedule: 42/64	Report: 70/95 Chavez, Norma (Hon.)		00032066		
4 Date 10/22/2007	5 Payee name Office Depot				
6 Amount (\$) \$284.50	7 Payee address City; State; Zip Code 1111 Geronimo El Paso, TX 79925				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Laser Jet Printer	Texas, complete Schedule T)		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date 11/17/2007	Payee name Office Depot				
Amount (\$)	Payee address City; State; Zip Code				
\$227.00	1111 Geronimo El Paso, TX 79925				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Printing copies and office su	Texas, complete Schedule T)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date	Payee name				
12/05/2007	Party Bowl				
Amount (\$)	Payee address City; State; Zip Code				
\$12.88	6440 Gateway East El Paso, TX 79905				
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Cups	Texas, complete Schedule T)		
EXPENDITURE					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date	Payee name				
07/18/2007	Pictopia				
Amount (\$)	Payee address City; State; Zip Code				
\$83.95	1300 666th St Emeryville, CA 94608				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Picture for Obama Campaig	Texas, complete Schedule T)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
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POLITIC	AL EXPENDITURES		SCHEDULE F		
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	tract Labor Loan Repayme ing Expense Transportation Contributions/l t Candidate/C ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)		
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)		
Schedule: 43/64			00032066		
4 Date 07/20/2007	5 Payee name Pizza Hut				
6 Amount (\$) \$17.18	7 Payee address City; State; Zip Code 5201 Montana El Paso, TX 79903				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Staff lunch	of Texas, complete Schedule T)		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date	Payee name				
09/12/2007 Amount (\$)	Razani, Ali (Mr.) Payee address City; State; Zip Code				
\$329.00	PO Box 2910 Austin, TX 78768				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign contract Labor	of Texas, complete Schedule T)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date	Payee name				
10/09/2007 Amount (\$)	Razani, Ali (Mr.) Payee address City; State; Zip Code				
\$600.00	PO Box 2910 Austin, TX 78768				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign stipend/Contra	of Texas, complete Schedule T) 🔲 ct Labor		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		
Date 10/17/2007	Payee name Razani, Ali (Mr.)				
Amount (\$) \$500.00	Payee address City; State; Zip Code PO Box 2910 Austin, TX 78768				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign contract labor	of Texas, complete Schedule T)		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:		

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		GORIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/ ing Legal Services Solicitation/Fund nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di	Contract Labor I Iraising Expense f strict /Rental Expense (Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee DTHER (enter a category not listed above)
1 PAGE # Schedule: 44/64	2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date	5 Payee name		
11/20/2007	Razani, Ali (Mr.)		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$250.00	PO Box 2910 Austin, TX 78768		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If	travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE		Campaign Stip	end/Contract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t: Office held:
Date	Payee name		
09/19/2007	Riverside High School		
Amount (\$)	Payee address City; State; Zip Code		
\$100.00	301 Midway El Paso, TX 79915		
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description (If Banner	travel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t: Office held:
Date	Payee name		
09/29/2007	Rudy's BBQ		
Amount (\$)	Payee address City; State; Zip Code		
\$357.23	6401 S. Desert Blvd El Paso, TX 79912		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If MAD sponsor I	travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t: Office held:
Date	Payee name		
11/03/2007	Ruiz, Lilia		
Amount (\$)	Payee address City; State; Zip Code		
\$160.00	5941 Marlin El Paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		travel outside of Texas, complete Schedule T) end/Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t: Office held:

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POLITICAL EXPENDITURES	
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Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	Contract Labor Loan Repa draising Expense Transporta t Contributio istrict Candide d/Rental Expense OTHER (ei	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee nter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 45/64			00032066
4 Date 10/14/2007	5 Payee name Ruiz, Luis		
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 5941 Marlin El Paso, TX 79924		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outs Campaign Stipend/Cor	side of Texas, complete Schedule T) 🔲 htract Labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/03/2007	Payee name Ruiz, Luis		
Amount (\$)	Payee address City; State; Zip Code		
\$160.00			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Campaign Stipend/Cor	side of Texas, complete Schedule T) Intract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/21/2007	Ruiz, Luis		
Amount (\$) \$80.00	Payee address City; State; Zip Code 5841 Marlin El Paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Campaign Stipend/Cor	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/07/2007	Payee name Ruiz, Luis		
Amount (\$)	Payee address City; State; Zip Code		
\$200.00	5941 Marlin El Paso, TX 79924		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Campaign Stipend/Cor	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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Austin, Texas 78711-2070

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fundraising Expense Trans nse Food/Beverage Expense Travel In District Contr Polling Expense Travel Out Of District Ca	Repayment/Reimbursement sportation Equipment & Related Expense ributions/Donations Made By andidate/Officeholder/Political Committee ER (enter a category not listed above)
1 PAGE # Schedule: 46/64 4 Date	5 Payee name	3 ACCOUNT # (TEC filers) 00032066
12/19/2007 6 Amount (\$) \$117.30	Sam's City; State; Zip Code 7 Payee address City; State; Zip Code 7100 Gateway West El Paso, TX 79925 TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)(b) Description (If trave Christmas Gifts for Christmas Gifts for	el outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date 10/18/2007 Amount (\$) \$200.00	Payee name Sean's Grant/First Light FCU Payee address City; State; Zip Code 9983 Kenworthy St el paso, TX 79924	
PURPOSE OF EXPENDITURE		el outside of Texas, complete Schedule T) uth Foundation Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date 07/09/2007	Payee name Shell Oil	

direct expenditure to benefit C/OH			
Date 07/09/2007	Payee name Shell Oil		
Amount (\$)	Payee address City; State; Zip Code		
\$152.34	3839 Airport Blvd Austin, TX 78722		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Sch Austin Gasoline expense	nedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date	Payee name		
08/20/2007	Shell Oil		
Amount (\$)	Payee address City; State; Zip Code		
\$235.53	3839 Airport Blvd Austin, TX 78722		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Sch Austin Gasoline expense	nedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	

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POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salarie ing Legal Services Solicita ise Food/Beverage Expense Travel Polling Expense Office (Printing Expense Office (E CATEGORIES s/Wages/Contract Labor tion/Fundraising Expense In District Overhead/Rental Expense lains how to complete this form. Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE # Schedule: 47/64	Report: 75/95 2 FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC filers) 00032066
4 Date 09/10/2007	5 Payee name Shell Oil	
6 Amount (\$) \$43.77	7 Payee address City; State; Zip Cod 3839 Airport Blvd Austin, TX 78722	le
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched	dule) (b) Description (If travel outside of Texas, complete Schedule T) Austin Gasoline expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/17/2007 Amount (\$)	Shell Oil Payee address City; State; Zip Cod	
\$32.00	12496 Montana Ave El Paso, TX 79938	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schee	dule) Description (If travel outside of Texas, complete Schedule T) campaign travel gasoline (reimburse A. Razani)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/17/2007	Payee name Shell Oil	
Amount (\$)	Payee address City; State; Zip Cod	le
\$50.00	1711 W Dickinson Blvd Fort Stockton, TX 79735	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schee	dule) Description (If travel outside of Texas, complete Schedule T) campaign travel gasoline (reimburse A. Razani)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
07/08/2007 Amount (\$)	Southwest Airlines Payee address City; State; Zip Cod	
\$185.90	2425 Wyman Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schee	dule) Description (If travel outside of Texas, complete Schedule T) El Paso to Austin Airfare
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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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					
Accounting/Bank Consulting Expe	nse Food/Beverage Expense Travel In District	Contributions/Donation	ns Made By		
Event Expense Fees	Event Expense Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee				
	The Instruction Guide explains how		, ,,		
1 PAGE #	2 FILER NAME	3 A	CCOUNT # (TEC filers)		
Schedule: 48/64	Report: 76/95 Chavez, Norma (Hon.)	0	0032066		
4 Date	5 Payee name				
09/12/2007	Southwest Airlines				
6 Amount (\$)	7 Payee address City; State; Zip Code				
\$267.30	2425 Wyman Dr Dallas, TX 75235				
	Dallas, TX 75255				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texa	as, complete Schedule T)		
PURPOSE		Air Fare: El Paso to Austin			
OF EXPENDITURE					
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:		
to benefit C/OH					
Date	Payee name				
09/18/2007	Southwest Airlines				
Amount (\$)	Payee address City; State; Zip Code				
\$10.00	2425 Wyman Dr				
	Dallas, TX 75235				
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texa Air Fee	as, complete Schedule T)		
OF		Air Fee			
EXPENDITURE					
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:		
direct expenditure to benefit C/OH					
Date	Payee name				
12/10/2007	Southwest Airlines				
Amount (\$)	Payee address City; State; Zip Code				
\$2.50	2425 Wyman Dr				
	Dallas, TX 75235				
PURPOSE	Category (See Categories listed at the top of this schedule)	, i i i i i i i i i i i i i i i i i i i	as, complete Schedule T)		
OF		Air Fee			
EXPENDITURE					
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:		
direct expenditure to benefit C/OH		3 -	-		
Date 07/01/2007	Payee name Speaking Rock Entertainment Center				
Amount (\$)	Payee address City; State; Zip Code				
	122 S Pueblo Road				
\$363.99	El Paso, TX 79907				
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texa	as, complete Schedule T)		
PURPOSE OF		Mexican American Democrats (MAD) lunch		
EXPENDITURE		sponsorship			
Complete ONLY '	Candidata / Officabelder name	Office courset:	Office hold:		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:		
to benefit C/OH					
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POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEGO		
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais	sing Expense Transportation I Contributions/D ct Candidate/O ental Expense OTHER (enter a	nt/Reimbursement Equipment & Related Expense onations Made By ficeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 49/64	Report: 77/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/18/2007	5 Payee name Sputik, Sputnik		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$150.00	2750 Old Lexington Dr Elgin, TX 78621		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Field Organization	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name State National Bank		
12/31/2007 Amount (\$)	Payee address City; State; Zip Code		
\$2.20	PO Box 5050 El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Activity fees	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/20/2007	Payee name Steak & Ale Restaurants		
Amount (\$)	Payee address City; State; Zip Code		
\$24.59			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o Pct Chair Campaign Lunch	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/05/2007	Payee name Steak & Ale Restaurants		
Amount (\$) \$17.29	Payee address City; State; Zip Code 1000 Magruder El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside o Constituent Lunch on Issue	of Texas, complete Schedule T) 🔲 2 S
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ntract Labor Loan Repaym sing Expense Transportatior Contributions/ ct Candidate/ ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 50/64	2FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 11/08/2007	5 Payee name Steak & Ale Restaurants		
6 Amount (\$) \$43.04	7 Payee address City; State; Zip Code 1000 Magruder El Paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Pct Chair Campaign Lunc	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/15/2007 Amount (\$) \$42.72	Payee name Steak & Ale Restaurants Payee address City; State; Zip Code 1000 Magruder El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Staff lunch	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/06/2007	Payee name Steak & Ale Restaurants		
Amount (\$) \$84.77	Payee address City; State; Zip Code 1000 Magruder El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Campaign Fundraiser vol	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/10/2007	Payee name Subia, Micaela		
Amount (\$) \$150.00	Payee address City; State; Zip Code 3419 Aurora Ave El Paso, TX 79930		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Luce Subia Memorial Fur	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

SCHEDULE F	

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundrai nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distr Printing Expense Office Overhead/Re The INSTRUCTION GUIDE explains how	Image: Spense Loan Repayment/Reimbursement ising Expense Transportation Equipment & Related Expense ict Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above) to complete this form. Form.	
1 PAGE # Schedule: 51/64	Report: 79/95 2 FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC file 00032066	ərs)
4 Date 09/29/2007	5 Payee name Super Stop		
6 Amount (\$) \$28.78	7 Payee address City; State; Zip Code 3600 Montana Ave El Paso, TX 79903		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Gas El Paso	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date 07/29/2007	Payee name Surf Club		
Amount (\$)	Payee address City; State; Zip Code		
\$98.79	2224 E Yandell El Paso, TX 79903		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Campaign staff meeting dinner	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date	Payee name		
07/30/2007	T-Mobile		
Amount (\$)	Payee address City; State; Zip Code		
\$228.73	8838 Viscount El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Cell phone expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date 08/27/2007	Payee name T-Mobile		
Amount (\$)	Payee address City; State; Zip Code		
\$214.01	8838 Viscount El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Cell phone expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	

(512)46

63-5800	1-800-325-8506

POLITIC	AL EXPENDITURES		SCHEDULE F
Adventision Fund	EXPENDITURE CATEGO		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ng Legal Services Solicitation/Fundraisi	t Contributions/I t Candidate/C ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 52/64	Report: 80/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 10/07/2007	5 Payee name T-Mobile		
6 Amount (\$) \$213.22	7 Payee address City; State; Zip Code 8838 Viscount El Paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Cell phone expense	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/29/2007	Payee name T-Mobile		
Amount (\$)	Payee address City; State; Zip Code		
\$241.10	8838 Viscount El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Cell phone expense	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/28/2007	Payee name T-Mobile		
Amount (\$)	Payee address City; State; Zip Code		
\$262.30	8838 Viscount El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Cell phone expense	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	I Office sought:	Office held:
Date 12/27/2007	Payee name T-Mobile		
Amount (\$)	Payee address City; State; Zip Code		
\$256.08	8838 Viscount El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Cell phone expense	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

1 PAGE #

Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

XPEN	NDITURES				SCHEDU	JLE F
	EXPE	NDITURE CATEC	GORIES			
Legal Se	verage Expense xpense Expense	Salaries/Wages/O Solicitation/Fundr Travel In District Travel Out Of Dis Office Overhead/ GUIDE explains how	raising Expense strict Rental Expense	Transportation I Contributions/D Candidate/O OTHER (enter a	nt/Reimbursement Equipment & Related onations Made By ficeholder/Political C a category not listed	Committee
1/95	2 FILER NAME Chavez, Norma (H	lon.)			3 ACCOUNT # 00032066	(TEC filers)
name CO						
address Airport I n, TX 78	Blvd	; Zip Code				
jory (See	Categories listed at the top	of this schedule)	(b) Description Austin Ga	(If travel outside o soline expense	of Texas, complete S	Schedule T)

POL	_ITICAL	EXPEN	DITURES
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Electronically filed us	sing Software	Version 3.3.

Schedule: 53/64	Report: 81/95 Chavez, Norma (Hon.)		00032066
4 Date	5 Payee name		
10/12/2007	Texaco		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$162.31	3839 Airport Blvd		
	Austin, TX 78722		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of	of Texas, complete Schedule T)
PURPOSE		Austin Gasoline expense	
OF EXPENDITURE			
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
11/13/2007	Техасо		
Amount (\$)	Payee address City; State; Zip Code		
\$243.32	3839 Airport Blvd		
φ <u></u> 2.10.02	Austin, TX 78722		
BUBBOOF	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
PURPOSE OF		Austin Gasoline expense	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
Complete ONLY if direct expenditure to benefit C/OH		Onice sought.	Office field.
Date	Payee name		
12/10/2007	Texaco		
Amount (\$)	Payee address City; State; Zip Code		
\$416.80	3839 Airport Blvd		
	Austin, TX 78722		
PURPOSE	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
OF		Campaign gas expense	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		Ŭ	
Date	Payee name Texas Democratic Party		
07/03/2007	Payee address City; State; Zip Code		
Amount (\$)			
\$120.00	707 Rio Grande Austin, TX 78701		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		Sustaining Membership Du	
OF EXPENDITURE		G P	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitatio se Food/Beverage Expense Travel In Polling Expense Travel Ou Printing Expense Office Ov	Vages/Contract Labor Loan Repayment/Reimbursement n/Fundraising Expense Transportation Equipment & Related Expense
1 PAGE # Schedule: 54/64	2FILER NAME Chavez, Norma (Hon.)	3 ACCOUNT # (TEC filers) 00032066
4 Date 09/14/2007	5 Payee name Texas Democratic Party	
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 707 Rio Grande Austin, TX 78701	
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul	e) (b) Description (If travel outside of Texas, complete Schedule T) El Paso Fundraiser Challenge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 07/31/2007	Payee name Texas Gas Service	
Amount (\$) \$19.18	Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedul	e) Description (If travel outside of Texas, complete Schedule T) Gas utility Austin TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/30/2007	Payee name Texas Gas Service	
Amount (\$) \$26.74	Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedul	e) Description (If travel outside of Texas, complete Schedule T) Gas utility Austin TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/28/2007	Payee name Texas Gas Service	
Amount (\$) \$8.68	Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedul	e) Description (If travel outside of Texas, complete Schedule T) Gas utility Austin TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
		Electronically filed using Software Version 3.3.7

512)463-5800	1-800-325-8506

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of District Printing Expense Office Overhead/Re The INSTRUCTION GUIDE explains how f	htract Labor Loan Repayment sing Expense Transportation I Contributions/D ct Candidate/O intal Expense OTHER (enter a	nt/Reimbursement Equipment & Related Expense onations Made By fficeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 55/64			3 ACCOUNT # (TEC filers) 00032066
4 Date 10/26/2007	5 Payee name Texas Gas Service		
6 Amount (\$) \$16.47	7 Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Gas utility Austin TX	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/27/2007	Payee name Texas Gas Service		
Amount (\$) \$23.96	Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Gas utility Austin TX	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/27/2007	Payee name Texas Gas Service		
Amount (\$) \$31.87	Payee address City; State; Zip Code P.O. Box 269042 Oklahoma City, OK 73126		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Gas utility Austin TX	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 07/11/2007	Payee name Texas House of Representatives		
Amount (\$) \$51.00	Payee address City; State; Zip Code 1400 Congress Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas flags for constituent	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		Elec	tronically filed using Software Version 3.3.7

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POLITIC	AL EXPENDITURES				SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense 5 ing Legal Services 5 se Food/Beverage Expense 7 Polling Expense 7	FURE CATEGOR Salaries/Wages/Contr Solicitation/Fundraisin Travel In District Travel Out Of District Office Overhead/Rent E explains how to	act Labor g Expense al Expense	Contributions/Donatic Candidate/Officeho OTHER (enter a cate	ment & Related Expense
1 PAGE # Schedule: 56/64	Report: 84/95 2 FILER NAME Chavez, Norma (Hon.)			-	ACCOUNT # (TEC filers) 00032066
4 Date 07/17/2007	5 Payee name Texas House of Representatives				
6 Amount (\$) \$205.05	-	p Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this	s schedule)	• • • •	f travel outside of Tex Airfare 07/09/07	as, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt:	Office held:
Date	Payee name				
07/26/2007 Amount (\$)	Texas House of Representatives Payee address City; State; Zi	p Code			
\$37.00	1400 Congress Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this	s schedule)	Description (I Texas flags fo		as, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt:	Office held:
Date	Payee name Texas Store				
11/20/2007 Amount (\$)		p Code			
\$97.42	2901 S. Capitol of Texas Hwy Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this	s schedule)		f travel outside of Tex s for Event (reiml	as, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt:	Office held:
Date 08/06/2007	Payee name Time Warner Cable				
Amount (\$) \$93.44	Payee address City; State; Zi 7010 Airport El Paso, TX 79925	p Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this	s schedule)	Description (I Austin cable s		as, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	nt:	Office held:

P.O.Box 12070 Austin, Texas 78711-2070

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SCHEDULE F

POLITICAL EXPENDITURES

Advertising Expe	EXPENDITURE CATEGO	ntract Labor Loan Repay	yment/Reimbursement
Accounting/Bank Consulting Exper	ing Legal Services Solicitation/Fundrai nse Food/Beverage Expense Travel In District	sing Expense I ransportat Contributior	tion Equipment & Related Expense ns/Donations Made By
Event Expense Fees	Polling Expense Travel Out Of Distri Printing Expense Office Overhead/Re	ct Candidat	te/Officeholder/Political Committee
1 663	The Instruction Guide explains how		nel a category not listed above)
1 PAGE #	2 FILER NAME	-	3 ACCOUNT # (TEC filers)
Schedule: 57/64			00032066
4 Date	5 Payee name		00002000
08/31/2007	Time Warner Cable		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$93.44	7010 Airport		
¢00111	El Paso, TX 79925		
8	(a) Category (See Categories listed at the top of this schedule)		ide of Texas, complete Schedule T)
PURPOSE OF		Austin cable service	
EXPENDITURE			
			0///
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
09/28/2007	Time Warner Cable		
Amount (\$)	Payee address City; State; Zip Code		
\$93.44	7010 Airport		
***	El Paso, TX 79925		
BUBBBBB	Category (See Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE OF		Austin cable service	
EXPENDITURE			
	Candidate / Officeholder name	Office couchts	Office held:
Complete ONLY if direct expenditure	Candidate / Onicendider name	Office sought:	Office field.
to benefit C/OH			
Date	Payee name		
10/29/2007	Time Warner Cable		
Amount (\$)	Payee address City; State; Zip Code		
\$95.71	7010 Airport		
	El Paso, TX 79925		
PURPOSE	Category (See Categories listed at the top of this schedule)		ide of Texas, complete Schedule T)
OF		Austin cable service	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		emot obugnt.	
to benefit C/OH			
Date	Payee name		
12/11/2007	Time Warner Cable		
Amount (\$)	Payee address City; State; Zip Code		
\$133.29	7010 Airport		
	El Paso, TX 79925		
	Cotogony (See Cotogonian listed at the tax of this activity)	Description (It to be to be	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outs Austin cable service	ide of Texas, complete Schedule T)
OF			
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		Ŭ	
			Flastranically filed using Cathyora Version 2.0

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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SCHEDULE F

POLITICAL	EXPENDITURES	

Advertising Expe	EXPENDITURE CATEO ense Gifts/Awards/Memorial Expense Salaries/Wages/O		yment/Reimbursement
Accounting/Bank	king Legal Services Solicitation/Fundr	raising Expense Transportal	tion Equipment & Related Expense
Consulting Expe Event Expense	nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis	trict Contribution	ns/Donations Made By te/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/		nter a category not listed above)
	The Instruction Guide explains how	w to complete this form.	
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 58/64	· · · · · · · · · · · · · · · · · · ·		00032066
4 Date	5 Payee name		
12/27/2007	Time Warner Cable		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$81.51	7010 Airport		
	El Paso, TX 79925		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		ide of Texas, complete Schedule T)
OF		Austin cable service	
EXPENDITURE			
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
11/17/2007	Tovar Flowers		
Amount (\$)	Payee address City; State; Zip Code		
\$89.85	El Paso, TX 79901		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE		Flower arrangement Inv	
OF EXPENDITURE		i letter allangement in	
EXPENDITORE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
11/28/2007	Tovar Flowers		
Amount (\$)	Payee address City; State; Zip Code		
\$57.37	216 South Kansas		
	El Paso, TX 79901		
PURPOSE	Category (See Categories listed at the top of this schedule)		ide of Texas, complete Schedule T)
OF		Flower arrangement Sa	alas
EXPENDITURE			
Complete ONLY #	Candidate / Officeholder name	Office sought:	Office held:
Complete ONLY if direct expenditure		Onice sought.	Onice neiu.
to benefit C/OH			
Date	Payee name		
12/22/2007	Tovar Flowers		
Amount (\$)	Payee address City; State; Zip Code		
\$79.02			
φ, υ.υ <u>ε</u>	El Paso, TX 79901		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE		Plant for Paul Strlzin In	v #2430
OF EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
	1		Electronically filed using Software Version 3.3.

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POLITIC	AL EXPE	NDITURES			SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal S nse Food/Be Polling I	vards/Memorial Expense Sa ervices So everage Expense Tra Expense Tra Expense Of The Instruction Guide	JRE CATEGOI alaries/Wages/Cont alaries/Wages/Cont alicitation/Fundraisin avel In District avel Out Of District fice Overhead/Ren explains how to	ract Labor Loan Repaying Expense Transportation Contribution: candidate tal Expense OTHER (ent	ment/Reimbursement on Equipment & Related Expense s/Donations Made By s/Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 59/64		2 FILER NAME Chavez, Norma (Hon.)			3 ACCOUNT # (TEC filers) 00032066
4 Date 11/20/2007	5 Payee name Twin Peaks				
6 Amount (\$) \$61.45	7 Payee addres 701 E. Stass Austin, TX 7	sney Ln	Code		
8 PURPOSE OF EXPENDITURE	(a) Category (Se	e Categories listed at the top of this s	schedule)	(b) Description (If travel outsid Constituent Lunch on Is:	de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought:	Office held:
Date 11/29/2007	Payee name Uniforms of	Texas			
Amount (\$) \$32.47	Payee addres 6601 Monta B El Paso, TX	na Ave	Code		
PURPOSE OF EXPENDITURE	Category (Se	e Categories listed at the top of this s	schedule)	Description (If travel outsid Embroidery for aprons (de of Texas, complete Schedule T) Fundraiser)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought:	Office held:
Date 09/07/2007	Payee name US Postmas	ter			
Amount (\$) \$175.00	Payee addres 219 E Mills El Paso, TX		Code		
PURPOSE OF EXPENDITURE	Category (Se	e Categories listed at the top of this s	schedule)	Description (If travel outsid Fee permit for presorted	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought:	Office held:
Date 10/15/2007	Payee name US Postmas	ter			
Amount (\$) \$42.44	Payee addres 219 E Mills El Paso, TX		Code		
PURPOSE OF EXPENDITURE	Category (Se	e Categories listed at the top of this s	schedule)	Description (If travel outsic campaign mailer	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sought:	Office held: Electronically filed using Software Version 3.3.7

Austin, Texas 78711-2070

S		SCHEDULE F
	NDITURE CATEGORIES	
ense	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)
UCTION	GUIDE explains how to complete this	form.

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund	strict Contribution /Rental Expense OTHER (en	ment/Reimbursement on Equipment & Related Expense s/Donations Made By e/Officeholder/Political Committee ter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 60/64			00032066
4 Date	5 Payee name		00002000
10/23/2007	US Postmaster		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$61.50	219 E Mills El Paso, TX 79901		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsi Mexican American Dem	de of Texas, complete Schedule T) 🔲 io mailer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/23/2007	US Postmaster		
Amount (\$)	Payee address City; State; Zip Code		
\$19.99	219 E Mills El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi Stamps	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/20/2007	US Postmaster		
Amount (\$)	Payee address City; State; Zip Code		
\$216.34	219 E Mills El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi 12/6/07 Mailer	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/25/2007	US Postmaster		
Amount (\$)	Payee address City; State; Zip Code		
\$41.00	219 E Mills El Paso, TX 79901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi postage (reimburse Mic	de of Texas, complete Schedule T) 🔲 hael Apodaca)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

	SCHEDULE F
E CATEGORIES	
LOATLOOMLS	

		EXPENI		ORIES		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal S nse Food/Be Polling	/ards/Memorial Expense ervices everage Expense Expense Expense	Salaries/Wages/Co Solicitation/Fundra Travel In District Travel Out Of Distr Office Overhead/R	ising Expense ict	Transportation Contributions/ Candidate/	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
rees	Fillung	The Instruction G				a category not listed above)
1 PAGE #		2 FILER NAME				3 ACCOUNT # (TEC filers)
Schedule: 61/64	Report: 89/95	Chavez, Norma (Hor	n.)			00032066
4 Date	5 Payee name					
11/29/2007	US Postmas					
6 Amount (\$)	7 Payee addres	s City; State;	Zip Code			
\$25.00	219 E Mills El Paso, TX	79901				
8 PURPOSE OF EXPENDITURE	(a) Category (Se	e Categories listed at the top of	this schedule)	(b) Description Postage due	(If travel outside e/return mail f	e of Texas, complete Schedule T)
		<i>(</i> ()				0///
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:
Date	Payee name					
12/01/2007	US Postmas	ter				
Amount (\$)	Payee addres	s City; State;	Zip Code			
\$12.30	219 E Mills El Paso, TX	79901				
	Category (Se	e Categories listed at the top of	this schedule)	Description	(If travel outside	e of Texas, complete Schedule T)
PURPOSE OF				Return Mail	Fees	
EXPENDITURE						
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:
Date	Payee name					
10/16/2007		nzalez Campaign				
Amount (\$)	Payee addres	•	Zip Code			
\$100.00	PO Box 141 McAllen, T>					
PURPOSE	Category (Se	e Categories listed at the top of	this schedule)	Description Donation	(If travel outside	of Texas, complete Schedule T)
OF EXPENDITURE						
						0.00
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:
Date	Payee name					
12/06/2007	Wal-Mart					
Amount (\$)	Payee addres	s City; State;	Zip Code			
\$44.87	6500 Gatew El Paso, TX					
PURPOSE OF EXPENDITURE	Category (Se	e Categories listed at the top of	this schedule)	Description Fundraiser	(If travel outside able cloth sna	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Office so	ught:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEG	ORIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/C ing Legal Services Solicitation/Fundra	ontract Labor Loan Repayn ising Expense Transportatio Contributions rict Candidate tental Expense OTHER (enter	nent/Reimbursement n Equipment & Related Expense /Donations Made By /Officeholder/Political Committee er a category not listed above)
1 PAGE # Schedule: 62/64	Report: 90/95 2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 12/14/2007	5 Payee name Wal-Mart		
6 Amount (\$) \$47.75	7 Payee address City; State; Zip Code 6500 Gateway West El Paso, TX 79925		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outsid Beverages for office	e of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/03/2007	Walgreen's		
Amount (\$) \$43.28	Payee address City; State; Zip Code 5401 Montana El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Office Supplies	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/14/2007	Payee name Walgreen's		
Amount (\$) \$8.66	Payee address City; State; Zip Code 5401 Montana El Paso, TX 79925		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Candy for office	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/15/2007	Payee name Walgreen's		
Amount (\$) \$148.62	Payee address City; State; Zip Code 5401 Montana El Paso, TX 79925	_	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Candy water beverages	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
		E	lectronically filed using Software Version 3.3.7

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	EXPENDITURE CATEG	ORIES						
Advertising Expe Accounting/Bank	king Legal Services Solicitation/Fundra	ontract Labor Loan Repa ising Expense Transporta	ayment/Reimbursement ation Equipment & Related Expense					
Consulting Expe Event Expense	pense Food/Beverage Expense Travel In District Contributions/Donations Made By							
Fees	Printing Expense Office Overhead/R	ental Expense OTHER (e	enter a category not listed above)					
	The INSTRUCTION GUIDE explains how	to complete this form.						
1 PAGE #	2 FILER NAME Chavez, Norma (Hon.)		3 ACCOUNT # (TEC filers)					
Schedule: 63/64 4 Date	5 Payee name		00032066					
10/17/2007	Wataburger							
6 Amount (\$)	7 Payee address City; State; Zip Code							
\$9.00	1230 Airway Blvd El Paso, TX 79925							
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel out	side of Texas, complete Schedule T)					
PURPOSE OF		staff meal (reimburse /	A. Razani)					
EXPENDITURE								
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:					
direct expenditure to benefit C/OH		- g						
Date 11/29/2007	Payee name West El Paso Tejano Democrats							
Amount (\$)	Payee address City; State; Zip Code							
\$30.00	El Paso, TX 79912							
	Category (See Categories listed at the top of this schedule)	Description (If travel out	side of Texas, complete Schedule T)					
PURPOSE OF		Membership Dues						
EXPENDITURE								
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:					
direct expenditure to benefit C/OH		Ū						
	Davias nome							
Date 07/04/2007	Payee name Whole Foods Market							
Amount (\$)	Payee address City; State; Zip Code							
\$51.07	Payee address City; State; Zip Code 1105 N Lamar							
φ31.07	Austin, TX 78703							
DUDDOOD	Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T)					
PURPOSE OF		Campaign BBQ suppli	es					
EXPENDITURE								
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:					
direct expenditure to benefit C/OH		enice sought.	emberheid.					
Date 07/21/2007	Payee name Wyler Aerial Tramway							
Amount (\$)	Payee address City; State; Zip Code							
\$14.00								
φ14.00	el paso, TX 79930							
DU-DO-D-	Category (See Categories listed at the top of this schedule)		side of Texas, complete Schedule T)					
PURPOSE OF		Constituent Gift						
EXPENDITURE								
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:					
direct expenditure		Onice Sought.	Unice neia.					
to benefit C/OH								

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SCHEDULE F

	EXPENDITURE CATEGO	RIES						
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Con ing Legal Services Solicitation/Fundrais	tract Labor Loan Repayme ing Expense Transportation Contributions/D tt Candidate/O ntal Expense OTHER (enter	nt/Reimbursement Equipment & Related Expense Jonations Made By fficeholder/Political Committee a category not listed above)					
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)					
Schedule: 64/64	Report: 92/95 Chavez, Norma (Hon.)		00032066					
4 Date 11/15/2007	5 Payee name Xpedex		•					
6 Amount (\$) \$253.82	7 Payee address City; State; Zip Code 6839 Market Ave El Paso, TX 79915							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Envelops for 12/06/07	of Texas, complete Schedule T)					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:					
Date	Payee name							
10/01/2007	Ysleta High School Football Boosters							
Amount (\$)	Payee address City; State; Zip Code							
\$100.00	8600 Alameda el paso, TX 79907							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside Program ad	of Texas, complete Schedule T)					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:					

	AL EXPE	SCHEDULE G			
Accounting/Banking Lega Consulting Expense Food Event Expense Pollir		EXPE Awards/Memorial Expense Services Beverage Expense J Expense g Expense The Instruction	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.		
1 PAGE # Schedule: 1/2 Re	· · · · · · · · · · · · · · · · · · ·	2 FILER NAME Chavez, Norma (H	Hon.)		3 ACCOUNT # (TEC filers) 00032066
4 Date 09/11/2007	5 Payee name Capitol Gift				
6 Amount (\$) \$50.00 Reimbursement from political contributions intended		ress 78701	e; Zip Code		
8 OF EXPENDITURE	(a) Category (S	ee Categories listed at the top	o of this schedule)		(If travel outside of Texas, complete Schedule T)
Date 09/11/2007	Payee name Costco	9			
Amount (\$) \$365.00 Reimbursement from political contributions intended	Payee addre 6101 Gatev El Paso, T	way Blvd West	e; Zip Code		
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed at the top	o of this schedule)	Description Video Camer	(If travel outside of Texas, complete Schedule T)
Date 08/07/2007	Payee name El Paso Dia				
Amount (\$) \$350.00 Reimbursement from political contributions intended	Payee addre 9700 Gatev el paso, TX	way Blvd North	e; Zip Code		
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed at the top	o of this schedule)		(If travel outside of Texas, complete Schedule T) D at Norma Chavez NIght at Diablos
Date 09/11/2007	Payee name El Taco To				
Amount (\$) \$28.00 Reimbursement from political contributions intended	Payee addre 9910 Monta El Paso, T	ana	e; Zip Code	-	
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed at the top	o of this schedule)		(If travel outside of Texas, complete Schedule T) imbursement intended)

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Food/Beverage Expense Travel In District Contributions/Donations Made By Polling Expense Contributions/Donations Made By Printing Expense Contributions/Optical Committed Consultions Fees Printing Expense Travel Out Of District Candidate/Officeholder/Political Committed Contributions/Donations Made By The INSTRUCTION Guide explains how to complete this form.							ommittee				
1 PAGE #			2 FILER	NAME		-			2	ACCOUNT #	(TEC filere)
				ez, Norma (F	lon)				3		(TLC mers)
Schedule: 2/2 Re	<u> </u>		Chave		1011.)					00032066	
4 Date	5	Payee name									
09/11/2007		El Taco Tote	;								
6 Amount (\$)	7	Payee addres	s	City; State	; Zip (Code					
	ľ	9910 Montar		ony, onato	, <u>—</u> р						
\$62.00 Reimbursement from political contributions intended		El Paso, TX									
8 PURPOSE OF EXPENDITURE) Category (See	e Categories	listed at the top	of this so	chedule)	(b) Description Staff lunch (r	(If travel outside or eimbursemen		exas, complete So tended)	chedule T)
Date		Payee name									
09/11/2007		Mulligan's N	orth								
Amount (\$)		Payee addres		City; State	; Zip (Code					
				•	, Σ ιρ (5000					
\$32.00 Reimbursement from political contributions intended		10710 Gatev El Paso, TX	79924								
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Staff lunch meeting (reimbursement intended)										

Information entered by filer as a memo

Schedule Cover Sheet Continued from Correction Affidavit: This report also corrects the original Schedule G to reflect a political expenditure from personal funds that was intended for reimbursement that was inadvertently reported as a reimbursement to the candidate/officeholder. This report updates the original report by providing some address information that was inadvertently omitted from the original report. All errors were made in good-faith and without intent to deceive or mislead. All errors were corrected as soon as possible after their discovery.\n