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

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

See backside for instructions

1 ACCOUNT # 00051464

2 Total pages filed: 20

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Enrique | MI

NICKNAME | LAST: Martin | SUFFIX

4 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [x] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED

Month Day Year: 01/01/2001 THROUGH Month Day Year: 03/26/2001

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Legal | Totals

Date Processed

Date Imaged

6 EXPLANATION OF CORRECTION

1. Anotate full addresses of Expenditures
2. Properly filled schedule G on Expenditure/Reimbursement
3. Proper Corrections made on Coversheet Pg 2

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct and that I am filing this corrected report promptly after learning of the error(s) in the original report. I swear, or affirm, under penalty of perjury, that I did not intend to violate a reporting requirement when I filed the original report.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

MELINDA S. LOPEZ NOTARY PUBLIC STATE OF TEXAS EXPIRES 04-04-2005

Sworn to and subscribed before me by J. Enrique Martin this the 7th day of August, 2002,

to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Melinda S. Lopez	Melinda S. Lopez	Notary

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed on recycled paper

(Revised 05/11/2000)

30 DAY before Election

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

RECEIVED CITY OF SAN ANTONIO CITY CLERK 2001 APR 9 P 2:

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

1 ACCOUNT # (Ethics Commission-filers) 00051464

2 Total pages this report: 40

1/18

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: Enrique | MI

NICKNAME: Kike | LAST: Martin | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

8327 Staton Dr.

San Antonio TX 78224

☐ Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: LTC (Ret) | FIRST: Tommie | MI

NICKNAME | LAST: Malone | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2202 Cypress Pearl

San Antonio TX 78232

7 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

( ) -

8 REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 01/01/2001 THROUGH Month Day Year: 03/26/2001

10 ELECTION

ELECTION DATE Month Day Year: 05/05/2001

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known): Other -- City Council 4

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

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

Name

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

☐ additional pages

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

(Effective 12/16/1999)

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME: Enrique Martin

15 ACCOUNT # (Ethics Commission filers): 00051464

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

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

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 11,950.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 70.13
4.	**TOTAL POLITICAL EXPENDITURES**	$ 17,827.58

OUTSTANDING LOAN TOTALS

5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 3,550.00

19 AFFIDAVIT

MELINDA S. LOPEZ NOTARY PUBLIC STATE OF TEXAS EXPIRES 04-04-2005

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said J. Enrique Martin, this the 7th day of August, 20 02, to certify which, witness my hand and seal of office.

Melinda S. Lopez	Melinda S. Lopez	Notary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

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2001 APR -5 P 2:40

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 3/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use) 00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/25/2001	Philip Bagnall 216 Lamont Avenue San Antonio TX 78209	100.00	
9 Principal occupation (Optional)		10 Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/25/2001	Jack Cavaleri P.O. Box 7608 San Antonio TX 78207	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/23/2001	David L. Earl,Attorney at Law 111 Soledad,Suite 1111 San Antonio TX 78205	100.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/12/2001	Davidson & Troillo a Prof. Corp. Comm. For Civic Awareness 7550 I.H. 10 West,Suite 800 San Antonio TX 78229	200.00	
Principal occupation (Optional)		Employer (Optional)	

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/08/2001	Sam Dawson 3802 Mill Court San Antonio TX 78230	250.00	
Principal occupation (Optional)		Employer (Optional)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 4/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
03/08/2001	DeZavala 31 Joint Venture 3707 N. St. Mary's St.,#201 San Antonio TX 78212	250.00	

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/20/2001	George Chall,Jr. Ins. 4606 Centerview,Suite 100 San Antonio TX 78228	100.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/09/2001	Bill Kaufman 230 Country Lane San Antonio TX 78209	250.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/20/2001	Law Office of Louis Rosenberg,P.C. P.O. Box 718 San Antonio TX 78293	100.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/27/2001	Daniel Markson 2421 Lake Pancoast Dr.,Apt. 4-C Miami Beach FL 33140	100.00	

Principal occupation (Optional)
Employer (Optional)

Revised 12/01/1999

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A 1
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The INSTRUCTION GUIDE explains how to complete this form.

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Total pages this report: 5/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
03/08/2001	Jason Morash 3537 Asbury St. Dallas TX 78205	750.00	

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

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/28/2001	Henry Munoz 235 W. Kings Hwy San Antonio TX 78212	1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/20/2001	Paul P. Garcia Plumbing & Heating Co. 422 Fitch San Antonio TX 78214	100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
01/09/2001	Raba-Kistner P.A.C.,Inc. P.O. Box 690286 San Antonio TX 78259	250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/09/2001	Raba-Kistner P.A.C.,Inc. P.O. Box 690287 San Antonio TX 78269	250.00	

Principal occupation (Optional) | Employer (Optional)

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CITY OF SAN ANTONIO

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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1 Total pages this report: 6/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/25/2001	Thomas Rademacher 14007 Bluff Manor Dr. San Antonio TX 78216	100.00	

9 Principal occupation (Optional)
10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/08/2001	Robert Richardson 5907 Royal Crest Dallas TX 78205	500.00	

Principal occupation (Optional)
Employer (Optional) —

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/25/2001	Jeffry Sailor 1011 N. Frio St. San Antonio TX 78207	100.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
02/25/2001	William Salomon 2 Inwood Knoll San Antonio TX 78248	100.00	

Principal occupation (Optional)
Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC(ID#_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
03/09/2001	Sam Barshop Special 900 Isom Rd.,Suite 300 San Antonio TX 78216	250.00	

Principal occupation (Optional)
Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report: 7/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use) 00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
03/16/2001	San Antonio Fire Fighters PAC 735 W. Magnolia San Antonio TX 78212	1500.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
03/21/2001	San Antonio Police Officers Association PAC 1939 N.E. Loop 410,#230 San Antonio TX 78217	4000.00	
Principal occupation (Optional)	Employer (Optional)		
02/19/2001	David Starr 2161 N.W. Military Hwy San Antonio TX 78213	500.00	
Principal occupation (Optional)	Employer (Optional)		
02/27/2001	Elliot Stone 13155 Keystone Terrace Miami Beach FL 33181	100.00	
Principal occupation (Optional)	Employer (Optional)		
02/28/2001	Edward Torres 2727 Treble Creek,Apt. 226 San Antonio TX 78250	500.00	
Principal occupation (Optional)	Employer (Optional)		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2001 APR -5 P

2: Total pages this report: 8/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission files)
00051464

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
02/25/2001	Brian Weiner 6 Contributor address; City; State; Zip Code P.O. Box 7608 San Antonio TX 78207	400.00	

9 Principal occupation (Optional)	10 Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 9/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Item)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/04/2001	3-D Screen Printing Somerset tx TX	2295.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Signs

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/09/2001	3-D Screen Printing Somerset tx TX	905.00

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/03/2001	Brenda Rios - Catering 23141 Hwy 16 S. SAT 78073 TX	62.00

Purpose of expenditure (See instructions regarding type of information required.)
Refreshments for campaign workers

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/17/2001	Brenda Rios - Catering 23141 Hwy 16 S SAT 78073 TX	14.22

Purpose of expenditure (See instructions regarding type of information required.)
Refreshments for campaign workers

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

SCHEDULE F

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CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 10/18

2 FILER NAME
Enrique Martin

2001 APR -5 P 2:41

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/09/2001	Bros Printing 503 E. DICKSON SAT 78214 TX	300.00

8 Purpose of expenditure (See instructions regarding type of information required.)
T-Shirts

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/20/2001	City of San Antonio P.O. Box 839966 SAT 78232 TX	100.00

Purpose of expenditure (See instructions regarding type of information required.)
Filing Fee

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/26/2001	Elections Support Services 4958 W. Military DR. SAT 78242 TX	466.45

Purpose of expenditure (See instructions regarding type of information required.)
Mailout

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2001	Elections Support Services 4958 W. Military DR. SAT 78242 TX	216.40

Purpose of expenditure (See instructions regarding type of information required.)
Mailout

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

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SCHEDULE F

2001 APR -5 P 2:41

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 11/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use) 00051484

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/02/2001	Elections Support Services 4958 W. Military DR. SAT 78242 TX	1892.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Mailout

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/01/2001	Elections Support Services 4958 W. Military DR. SAT 78242 TX	1929.73

Purpose of expenditure (See instructions regarding type of information required.)
Mailout

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2001	Eller Media 3714 N. Pan Am Expwy SAT 78219 TX	2590.75

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/27/2001	Allen Flores 711 Berlin SAT 78211 TX	60.00

Purpose of expenditure (See instructions regarding type of information required.)
Campaign support services

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

SCHEDULE F

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CITY OF SAN ANTONIO
CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

2001 APR -5 P 2:41

1 Total pages report: 12/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/25/2001	Edward Flores 10100 Reunion Pl. SAT 78216 TX	103.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign services rendered.

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/13/2001	Garza's Food Market 7710 Somerset Rd SAT 78211 TX	200.00

Purpose of expenditure (See instructions regarding type of information required.)
Refreshments

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/26/2001	Home Depot 2658 S.W. Military DR. SAT 78224 TX	139.01

Purpose of expenditure (See instructions regarding type of information required.)
Materials

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/19/2001	Home Depot 2658 S.W. Military DR. SAT 78224 TX	32.73

Purpose of expenditure (See instructions regarding type of information required.)
Materials

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

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POLITICAL EXPENDITURES

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2002 AUG 7 AM 10:15

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03-13-2001	Home Depot 2658 S.W. Military Dr. SAT 78224	23.18

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03-18-2001	Home Depot 2658 S.W. Military Dr. SAT 78224	64.42

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02-28-2001	McCoy's Lumber 8212 S. Presa St. SAT 78223	140.15

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

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2001 APR -5 P 2:41

The INSTRUCTION GUIDE explains how to complete this form.

Total pages report: 14/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/07/2001	McCoy's Lumber 8212 S. Presa st. SAT 78223 TX	109.97

8 Purpose of expenditure (See instructions regarding type of information required.)
Materials

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/30/2001	Munguia Printers 2201 Buena Vista st. SAT 78207 San Antonio TX	654.10

Purpose of expenditure (See instructions regarding type of information required.)
Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2001	Munguia Printers 2201 Buena Vista st. SAT 78207 San Antonio TX	192.02

Purpose of expenditure (See instructions regarding type of information required.)
Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/27/2001	Munguia Printers 2201 Buena Vista st. SAT 78207 San Antonio TX	1412.11

Purpose of expenditure (See instructions regarding type of information required.)
Printing

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2001 APR -5 P 2:41

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 15/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use) 00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/24/2001	Munguia Printing 2201 Buena Vista St. SAT 78207 San Antonio TX	500.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Printing

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/16/2001	Regino Longoria DJ Depot P O. Box 690415 SAT 78216 TX	75.00

Purpose of expenditure (See instructions regarding type of information required.)
DJ Music

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/20/2001	Regino Longoria DJ Depot P.O. Box 690415 SAT 78216 TX	100.00

Purpose of expenditure (See instructions regarding type of information required.)
DJ Music

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2001	Southwestern Bell P.O. Box 1780 Houston Tx 77251 TX	202.68

Purpose of expenditure (See instructions regarding type of information required.)
Telephone Services

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2001 APR -5 P 2:46

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 16/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/08/2001	Southwestern Bell P.O. Box 1780 Houston TX 77251 TX	408.85

8 Purpose of expenditure (See instructions regarding type of information required.)
Headquarters installation fees

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/08/2001	Southwestern Bell P.O. Box 1780 Houston TX 77251 TX	327.62

Purpose of expenditure (See instructions regarding type of information required.)
Phone

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/25/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	340.00

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/02/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	148.50

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Revised 11/12/1999

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2001 APR -5 P 2:41

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 17/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Use)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/02/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	170.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/04/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	204.00

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/07/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	68.28

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
03/07/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	340.00

Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

POLITICAL EXPENDITURES

SCHEDULE F

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2001 APR -5 P 2:41

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report: 18/18

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission Ben)
00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/21/2001	U.S. Postmaster 7411 Barlite SAT 78224 TX	340.00

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
01/24/2001	Jesse Villela 1007 Glamis AVE. SAT 78223 TX	210.00

Purpose of expenditure (See instructions regarding type of information required.)
Campaign services rendered.

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

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
02/20/2001	Jesse Villela 1007 Glamis AVE. SAT 78223 TX	150.41

Purpose of expenditure (See instructions regarding type of information required.)
Reimbursement for materials

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

2002 AUG -7 AM 10:15

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Revised 11/12/1999

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 1/1

2 FILER NAME: ENRIQUE MARTIN

3 ACCOUNT # (Ethics Commission filers): 00051464

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)	Reimbursement from political contributions intended
03-08-2001	ENRIQUE MARTIN 8327 STATON DR. SAT 78224	Reimbursement for Postage	340.00	☑
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐
Date	Payee name Payee address; City; State; Zip Code	Purpose of expenditure (See instructions regarding type of information required.)	Amount ($)	☐

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED