



CAMPAIGN CONTRIBUTION REPORT FORM

El Paso County Ethics Commission

1. If a member of commissioners court, or candidate for a seat on commissioners court whose name will appear on the General Election ballot, accepts political campaign contributions of Two Thousand, Five Hundred and No/100 Dollars (\$2,500.00) or more, including in-kind contributions, from any one person or entity within a twelve month period, he/she shall report the amounts, the donor, and the dates of said contributions by an item on the agenda of the El Paso County Commissioners Court within 30 days of the date of said cumulative contribution. The report shall also be placed upon the El Paso County web page.
 - A. If a member of Commissioners Court, or candidate for a seat on Commissioners Court whose name will appear on the General Election ballot, accepts political campaign contributions totaling Two Thousand, Five Hundred and No/100 Dollars (\$2,500.00) or more, including in-kind contributions, from any one person or entity within a twelve month period from the date of the donor's current contribution, he shall report the amounts, the donor, and the dates of said contributions by an item on the agenda of the El Paso County Commissioners Court within 30 calendar days of the date of said cumulative contribution. The report shall also be placed upon the El Paso County web page.
 - B. For campaign contributions accepted by a candidate immediately preceding determination of which candidate's name will appear on the general election ballot. For additional reporting requirements, see El Paso County Code of Ethics Section 13.2.
2. The placement of this completed form on the agenda of the El Paso County Commissioners Court shall satisfy the requirements of the Code of Ethics regarding reporting Campaign Contributions.

3. **Name of Person Reporting:** _____

4. **Donor(s) of contributions within a 12-month period of \$2,500.00 or more:**
(List each contribution which when added together totals \$2,500.00 or more from a single donor, and the date each contribution was received.)

DONOR		CUMULATIVE AMOUNT ON
NAME: _____		DONATION DATE:
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____

DONOR		CUMULATIVE AMOUNT ON
NAME: _____		DONATION DATE:
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____
AMOUNT: _____	DATE: _____	\$ _____