

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
		Jesus	M		
NICKNAME	LAST	SUFFIX			
Chuy	Dominguez				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;		STATE;
<input type="checkbox"/> Change of Address	201 W. Hillside	Suite 17	Laredo	Texas	78041
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(956)	728-1477			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI		
	Mr	Miguel	Angel		
NICKNAME	LAST	SUFFIX			
	Flores				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
	2612 Burke Drive, Laredo Texas 78045				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(956)	334-5243			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	07	1	2018		10 8 2018
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description	
	11	06	2018	<input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
			Municipal Court Judge		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$34,050.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$30,535.10

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

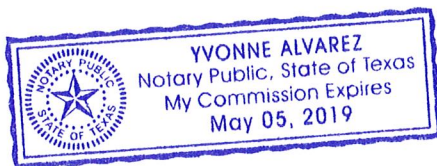
\$12,766.77

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$40,000.00

18 AFFIDAVIT



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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jesus M. Dominguez, this the 8th day of October, 2018, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Yvonne Alvarez
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$34,050.00
2.	<input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$1,990.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$30,553.10
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Roberto Calderon 6 Contributor address; City; State; Zip Code 2520 Santa Ursula Ave. Laredo, Texas 78043	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Abel & Ana Aranda Contributor address; City; State; Zip Code 330 St. Julien Dr. Laredo, Texas 78041	Amount of contribution (\$) \$100.00
Contributor's principal occupation Self Employed/ Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Martha C. Narvaez Contributor address; City; State; Zip Code 1620 San Bernardo Ave. Laredo, Texas 78040	Amount of contribution (\$) \$150.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Narvaez Flower Shop		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Arturo Dominguez 6 Contributor address; City; State; Zip Code 102 Granada Circle Laredo, Texas 78041	7 Amount of contribution (\$) \$250
8 Contributor's principal occupation Business Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Gregorio Salazar Contributor address; City; State; Zip Code 314 Manor Rd Laredo, Texas 78041	Amount of contribution (\$) \$500.00
Contributor's principal occupation Custom Broker		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Miguel Angel Flores Contributor address; City; State; Zip Code 2612 Burke Dr. Laredo, Texas 78045	Amount of contribution (\$) \$1000.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Angela Michelle Lutz 6 Contributor address; City; State; Zip Code 312 Lake Powell Laredo, Teas 78041	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Anna L. Cavazos Ramirez Contributor address; City; State; Zip Code 1307 Wingfoot Loop Laredo, Texas 78045	Amount of contribution (\$) \$250
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Ricardo Gomez Contributor address; City; State; Zip Code 414 Rienda Laredo, Texas 78045	Amount of contribution (\$) \$100.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Myrthala Garza 6 Contributor address; City; State; Zip Code 1301 Kimberly Laredo, Texas 78045	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Jorge Montemayor Contributor address; City; State; Zip Code 622 Merlin Road Laredo, Texas 78041	Amount of contribution (\$) \$150.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Jorge Serrato/ Mayte Gonzalez Contributor address; City; State; Zip Code 340 Collado Dr. Laredo, Texas 78045	Amount of contribution (\$) \$100.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Blanca M. Martinez 6 Contributor address; City; State; Zip Code 303 W. Peach Lane Laredo, Texas 78041	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Laura R. Llanes Contributor address; City; State; Zip Code 3203 Windfall Laredo, Texas 78045	Amount of contribution (\$) \$250.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ David Gustavo Nunez Montoya Contributor address; City; State; Zip Code 312 Lake Powell Dr Laredo, Texas 78041	Amount of contribution (\$) \$200.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Roel Canales 6 Contributor address; City; State; Zip Code 314 Nye Dr Laredo, Texas 78041	7 Amount of contribution (\$) \$300.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title Attorney
9 Contributor's employer/law firm Canales P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Adrian Vera Jr./ Norma Vera Contributor address; City; State; Zip Code 115 Florida Laredo, Texas 78041	Amount of contribution (\$) \$250.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Hector & Roseanna Hinojosa Contributor address; City; State; Zip Code 406 Northstar Laredo, Texas 78045	Amount of contribution (\$) \$1,000.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor Rogelio M. Cantu 6 Contributor address; 2906 Robert Frost out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78041	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor Adrian Chapa Contributor address; 1302 Washington St out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78040	Amount of contribution (\$) \$100.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor Alberto Alarcon Contributor address; 1302 Washington out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78040	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner		Contributor's job title Attorney
Contributor's employer/law firm Alarcon & Alarcon LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/14/2018	5 Full name of contributor out-of-state PAC ID#: _____ David E. Garcia 6 Contributor address; City; State; Zip Code 719 Chihuahua St. Suite 105 Laredo, Texas 78040	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title Attorney
9 Contributor's employer/law firm Law Offices of David E. Garcia, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/03/2018	Full name of contributor out-of-state PAC ID#: _____ John R. Solis Contributor address; City; State; Zip Code 2620 San Bernardo Ave. Laredo, Texas 78040	Amount of contribution (\$) \$2,000.00
Contributor's principal occupation Business Owner		Contributor's job title Attorney
Contributor's employer/law firm Law Office of John Solis		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2015	Full name of contributor out-of-state PAC ID#: _____ Carlos Fernandez Contributor address; City; State; Zip Code	Amount of contribution (\$) \$250.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Lucy Carizalez Garcia 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$200.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Sandra Munoz Contributor address; City; State; Zip Code 2600 Baltimore St Laredo, Texas 78041	Amount of contribution (\$) \$100.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/15/2018	Full name of contributor out-of-state PAC ID#: _____ Andy Ramos Jr Contributor address; City; State; Zip Code 606 Taylor St Laredo, Texas 78041	Amount of contribution (\$) \$250.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/2018	5 Full name of contributor out-of-state PAC ID#: _____ Rafa Duenas 6 Contributor address; City; State; Zip Code 1504 Palmer Dr Laredo, Texas 78045	7 Amount of contribution (\$) \$120.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/24/2018	Full name of contributor out-of-state PAC ID#: _____ Arturo N. Benavidez Contributor address; City; State; Zip Code 1202 E. Del Mar Blvd Suite 3 Laredo, Texas 78041	Amount of contribution (\$) 2,500.00
Contributor's principal occupation Property Management		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/3/2018	Full name of contributor out-of-state PAC ID#: _____ Robert Garza Contributor address; City; State; Zip Code 12115 Doc Adams St Laredo, Texas 78045	Amount of contribution (\$) \$1,000.00
Contributor's principal occupation Business Owner/ Transportation		Contributor's job title
Contributor's employer/law firm Freightsol		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 7/25/2018	5 Full name of contributor out-of-state PAC ID#: _____ Yvonne Arroyo 6 Contributor address; City; State; Zip Code 3109 Cortez St Laredo, Texas 78043	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation Paralegal		9 Contributor's job title
9 Contributor's employer/law firm Law Office of Jesus M. Dominguez		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/23/2018	Full name of contributor out-of-state PAC ID#: _____ Meme Gonzalez Contributor address; City; State; Zip Code 1020 Main Avenue Laredo, Texas 78040	Amount of contribution (\$) \$500.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 7/23/2018	Full name of contributor out-of-state PAC ID#: _____ Rebecca Azios Contributor address; City; State; Zip Code 3 Weatherwood Laredo, Texas 78041	Amount of contribution (\$) \$250.00
Contributor's principal occupation Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 7/23/2018	5 Full name of contributor Jose Luis Castillo 6 Contributor address; 1302 Lois Lane out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78041	7 Amount of contribution (\$) \$1,000.00
8 Contributor's principal occupation Owner		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Jose Luis Castillo, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/23/2018	Full name of contributor Tom Benavides Contributor address; 1202 E. Del Mar Blvd Suite 3B out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78041	Amount of contribution (\$) \$2,500.00
Contributor's principal occupation Property Management		Contributor's job title
Contributor's employer/law firm The Arturo Tomas Benavidez		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 7/13/2018	Full name of contributor Jesus Covarrubias Contributor address; 9003 San Dario Ave out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78045	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner/ Import Export		Contributor's job title
Contributor's employer/law firm Jecov Freight Forwarding, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 7/23/2018	5 Full name of contributor out-of-state PAC ID#: _____ John or Anna Galo 6 Contributor address; City; State; Zip Code 104 Brand Dr. Laredo, Texas 78041	7 Amount of contribution (\$) \$2,500.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/23/2018	Full name of contributor out-of-state PAC ID#: _____ Paul C. Saenz Contributor address; City; State; Zip Code 1302 Washington St Laredo, Texas 78040	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Paul C. Saenz		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/17/2018	Full name of contributor out-of-state PAC ID#: _____ Juan R. Lozano/ Adriana M. Lozano Contributor address; City; State; Zip Code 9804 Suncrest Laredo, Texas 78045	Amount of contribution (\$) \$100.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/18/2018	5 Full name of contributor out-of-state PAC ID#: _____ Russell Jerome Jordan 6 Contributor address; City; State; Zip Code 1020 Main Ave. Laredo, Texas 78040	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Russell J. Jordan, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/10/2018	Full name of contributor out-of-state PAC ID#: _____ Javier Montemayor Jr Contributor address; City; State; Zip Code 7718 McPherson Rd., Suite F150 Laredo, Texas 78040	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner		Contributor's job title Attorney
Contributor's employer/law firm Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/14/2018	Full name of contributor out-of-state PAC ID#: _____ Edelmiro Martinez Contributor address; City; State; Zip Code 502 Houston Laredo, Texas 78040	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm E & G Real Estate Investment LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME: Jesus M. Dominguez

3 Filer ID (Ethics Commission Filers)

4 Date
8/23/2018

5 Full name of contributor out-of-state PAC ID#: _____)

Marco Antonio Morales

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

\$150.00

8 Contributor's principal occupation

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date
8/29/2018

Full name of contributor out-of-state PAC ID#: _____)

Gerardo Gonzalez Juaristi

Contributor address; City; State; Zip Code
2420 Bermuda Dr Laredo, Texas 78045

Amount of contribution (\$)

\$500.00

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date
8/29/2018

Full name of contributor out-of-state PAC ID#: _____)

Antonio Yarza

Contributor address; City; State; Zip Code
2610 Burke Laredo, Texas 78045

Amount of contribution (\$)

\$500.00

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/29/2018	5 Full name of contributor out-of-state PAC ID#: _____ Rigoberto Lopez 6 Contributor address; City; State; Zip Code 315 Calle Del Norte Suite 201 Laredo, Texas 78041	7 Amount of contribution (\$) \$200.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title Certified Public Accountant
10 Contributor's employer/law firm R. Lopez CPA		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/16/2018	Full name of contributor out-of-state PAC ID#: _____ Rafael R. Orduna/ Patricia C. Orduna Contributor address; City; State; Zip Code 1309 Nicklaus Loop N. Laredo, Texas 78045	Amount of contribution (\$) \$100.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 8/28/2018	Full name of contributor out-of-state PAC ID#: _____ Jose D. Gonzalez Contributor address; City; State; Zip Code 506 Modern Lane Laredo, Texas 78041	Amount of contribution (\$) \$250.00
Contributor's principal occupation Business Owner/ Custom Broker		Contributor's job title
Contributor's employer/law firm JD Gonzalez CHB		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/29/2018	5 Full name of contributor out-of-state PAC ID#: _____ Eduardo E. Lozano/ Martha P. Lozano 6 Contributor address; City; State; Zip Code 8505 Callow Court Laredo, Texas 78045	7 Amount of contribution (\$) \$200.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/5/2018	Full name of contributor out-of-state PAC ID#: _____ Antonio Pena Contributor address; City; State; Zip Code 4317 San Dario Ave Laredo, Texas 78041	Amount of contribution (\$) \$300.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm All Approved Trucks & Cars LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/5/2018	Full name of contributor out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code 1619 Market St Laredo, Texas 78043	Amount of contribution (\$) \$300.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Reyes & Pena Investments INC DBA Five Star Auto & Truck Sales		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 9/6/2018	5 Full name of contributor out-of-state PAC ID#: _____ Erik A. Gutierrez 6 Contributor address; City; State; Zip Code 6813 Sandhill Unit 8 Laredo, Texas 78045	7 Amount of contribution (\$) \$150.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/5/2018	Full name of contributor out-of-state PAC ID#: _____ Ruben Cantu Contributor address; City; State; Zip Code 8300 Mines Road Laredo, Texas 78045	Amount of contribution (\$) \$1,500.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Twin City Trucks & Cars, INC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/05/2018	Full name of contributor out-of-state PAC ID#: _____ Diana M. Dozal Contributor address; City; State; Zip Code 1901 San Dario Ave Laredo, Texas 78040	Amount of contribution (\$) \$300.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Approved Auto Sales		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 9/5/2018	5 Full name of contributor Diana M. Dozal 6 Contributor address; 1901 San Dario Ave out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78040	7 Amount of contribution (\$) \$300.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title
9 Contributor's employer/law firm Approved Auto Sales		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/18/2018	Full name of contributor Evan Gutierrez Contributor address; 6544 Grande Bay out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78041	Amount of contribution (\$) \$200.00
Contributor's principal occupation Senior Title Examiner		Contributor's job title
Contributor's employer/law firm Stewart Title		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/17/2018	Full name of contributor J. Omar Gonzalez Jr. Contributor address; 3008 Woodland Cove out-of-state PAC ID#: _____ City; State; Zip Code Laredo, Texas 78045	Amount of contribution (\$) \$400.00
Contributor's principal occupation Business Owner/ Freight Fowarder		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 22
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 9/11/2018	5 Full name of contributor out-of-state PAC ID#: _____ Jorge Cigarroa / Adriana Cigarroa 6 Contributor address; City; State; Zip Code PO Box 642 Laredo, Texas 78042	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Business Owner/ Custom Broker		9 Contributor's job title
9 Contributor's employer/law firm Cigarroa Dispatch		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/11/2018	Full name of contributor out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code 602 E. Calton Rd P.O. Box 6668 Laredo Texas 78041	Amount of contribution (\$) \$1,000.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Person, Witworth Borchers & Morales LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/6/2018	Full name of contributor out-of-state PAC ID#: _____ Sergio Lozano Contributor address; City; State; Zip Code 1010 Juarez Ave. Laredo, Texas 78040	Amount of contribution (\$) \$300.00
Contributor's principal occupation Business Owner		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Sergio Lozano		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 8/14/2018	5 Full name of contributor out-of-state PAC ID#: _____ Rafael Tawil 6 Contributor address; City; State; Zip Code 3311 Tiger Ct Laredo, Texas 78041	7 Amount of contribution (\$) \$300.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title
9 Contributor's employer/law firm TUM Logistics Inc		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/26/2018	Full name of contributor out-of-state PAC ID#: _____ Eustorgio Perez Contributor address; City; State; Zip Code 1102 Scott St Laredo, Texas 78040	Amount of contribution (\$) \$100.00
Contributor's principal occupation Business Owner		Contributor's job title \$100.00
Contributor's employer/law firm Eustorgio Perez Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/4/2018	Full name of contributor out-of-state PAC ID#: _____ Dr. Eliel Nataki Contributor address; City; State; Zip Code 6801 McPherson Rd Laredo, Texas 78041	Amount of contribution (\$) \$500.00
Contributor's principal occupation Business Owner		Contributor's job title Doctor
Contributor's employer/law firm Laredo Pain Consultants Inc		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2018	5 Full name of contributor out-of-state PAC ID#: _____ Santiago D. Lozano/ Mariaelena Lozano 6 Contributor address; City; State; Zip Code 8912 Orange Blossom Laredo, Texas 78045	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation Business Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/4/2018	Full name of contributor out-of-state PAC ID#: _____ Matias De Llano Contributor address; City; State; Zip Code 3113 Fair Oak Drive Laredo, Texas 78045	Amount of contribution (\$) \$200.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
4 Date 10/4/2018	5 Full name of contributor out-of-state PAC ID#: _____ Fernando De LLano 6 Contributor address; City; State; Zip Code 307 Jordan Laredo, Texas 78041	7 Amount of contribution (\$) \$150.00
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/4/2018	Full name of contributor out-of-state PAC ID#: _____ Zulema De Llano Contributor address; City; State; Zip Code 2615 Mier St. Laredo, Texas 78043	Amount of contribution (\$) \$100.00
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/4/2018	Full name of contributor out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code 802 Bellegrino Ct Laredo, Texas 78045	Amount of contribution (\$) \$100.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm AMC Lease LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)
8 Date 10/4/2018	9 Full name of contributor out-of-state PAC ID#: _____ Sergio Muzza 10 Contributor address; City; State; Zip Code 3801 Winrock Laredo, Texas 78045	11 Amount of contribution (\$) \$300.00
9 Contributor's principal occupation Business Owner		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/2/2018	Full name of contributor out-of-state PAC ID#: _____ Fernando Solis Contributor address; City; State; Zip Code 821 Pacific Blvd Laredo, Texas 78045	Amount of contribution (\$) \$250.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm Fernando Solis & Associates LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/1/2018	Full name of contributor out-of-state PAC ID#: _____ Jorge N. Larralde Contributor address; City; State; Zip Code 310 Crossroads Laredo, Texas 78045	Amount of contribution (\$) \$1,000.00
Contributor's principal occupation Business Owner		Contributor's job title
Contributor's employer/law firm AFS Fowarding LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 8/15/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector Tito Garcia	8 Amount of Contribution \$1,500.00	9 In-kind contribution description Food, Drinks and Service for Fundraiser
	7 Contributor address; City; State; Zip Code 1000 Zaragoza Laredo, Texas 78040	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
9 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) General Manager		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) General Manager		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 8/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nora Flores, Promega	Amount of Contribution \$ \$290.00	In-kind contribution description Advertisement/ Flyers/ Invitations
	Contributor address; City; State; Zip Code 1615 Jacaman Rd Laredo Texas 78041	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Owner		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME: Jesus M. Dominguez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 8/15/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DJ Cash 7 Contributor address; City; State; Zip Code Laredo, Texas	8 Amount of Contribution \$200.00	9 In-kind contribution description Music DJ Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/>
4 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) General Manager		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) General Manager		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) DJ		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J):	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES		\$	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of Pledge \$	9 In-kind contribution description
	7 Pledgor address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Pledgor's principal occupation		11 Pledgor's job title	
12 Pledgor's employer/law firm		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J):
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial Institution? Y N	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> none		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 07/26/2018	5 Payee name Lamar Media Corporation	
6 Amount (\$) 900.00	7 Payee address; City; State; Zip Code 5543 East Highway 359 Laredo, Texas 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 7/30/2018	Candidate / Officeholder name El Querreque Grill	
Amount (\$) 68.51	City; State; Zip Code Laredo, Texas 78045	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ meeting	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 7/30/2018	Candidate / Officeholder name The Home Depot	
Amount (\$) 91.76	City; State; Zip Code Laredo Texas 78041	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Material for signs	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
4 Date 07/31/2018	5 Payee name IBC				
6 Amount (\$) 17.35	7 Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo Texas 78042				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Analysis Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 7/26/2018	Payee name C&E Communications				
Amount (\$) 17,000.00	Payee address; City; State; Zip Code 8127 Mesa Drive Suite B206-153 Austin Texas 78750				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 8/17/2018	Payee name Facundo Mondragon				
Amount (\$) 425.00	Payee address; City; State; Zip Code , Laredo Texas 78041				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 8/24/2018	5 Payee name Print and More
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6 Amount (\$) 672.20	7 Payee address; City; State; Zip Code 3911 Hwy Zapata Memorial Laredo, Texas 78043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/27/2018	Payee name Suarez Restaurant
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Amount (\$) 7.00	Payee address; City; State; Zip Code 4800 McPherson Rd Laredo, Texas 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ meeting	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/27/2018	Payee name Patria Office Supply
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Amount (\$) 12.67	Payee address; City; State; Zip Code 301 E. Calton Rd, Laredo Texas 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Flyers	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 8/27/2018	5 Payee name Office Depot	
6 Amount (\$) 44.72	7 Payee address; City; State; Zip Code 5718 N. San Bernardo Ave Laredo, Texas 78041	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Supplies/ Signs	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 8/27/2018	Payee name Danny's Restaurant	
Amount (\$) 50.76	Payee address; City; State; Zip Code 2406 Jacaman Rd Laredo, Texas 78041	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ meeting	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
Date 8/27/2018	Payee name Promega Signs	
Amount (\$) 2,500.00	Payee address; City; State; Zip Code 1615 Jacaman Rd Laredo Texas 78041	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 8/28/2018	5 Payee name Lowes	
6 Amount (\$) 36.19	7 Payee address; City; State; Zip Code 6623 San Dario Ave Laredo, Texas 78041	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Materials/ Signs	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 8/28/2018	Payee name The Home Depot	
Amount (\$) 65.73	Payee address; City; State; Zip Code 5710 San Bernardo Ave Laredo, Texas 78041	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Material/ Signs	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 8/30/2018	Payee name Lamar Media	
Amount (\$) 91.76	Payee address; City; State; Zip Code 5543 East Highway 359 Laredo, Texas 78046	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 8/31/2018	5 Payee name IBC
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6 Amount (\$) 23.93	7 Payee address; City; State; Zip Code 1200 San Bernardo Laredo, Texas 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Analysis Charge	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/04/2018	Payee name Juan Rodriguez
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Amount (\$) 300.00	Payee address; City; State; Zip Code Laredo, Texas 78045
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/4/2018	Payee name Walmart
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Amount (\$) 11.56	Payee address; City; State; Zip Code 5610 San Bernardo Ave, Laredo Texas 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Material for Campaign	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 9/11/2018		5 Payee name Promega			
6 Amount (\$) 2,000.00		7 Payee address; City; State; Zip Code 1615 Jacaman Rd Laredo Texas 78041			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought
Date 9/13/2018		Payee name Sams Club			
Amount (\$) 190.12		Payee address; City; State; Zip Code 4810 San Bernardo Ave Laredo, Texas 78041			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ meeting		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought
Date 9/13/2018		Payee name Gotprint.com			
Amount (\$) 430.22		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement /Door Hangers		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 9/17/2018	5 Payee name Suarez Restaurant
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6 Amount (\$) 96.78	7 Payee address; City; State; Zip Code 4800 McPherson Laredo, Texas 78041
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/ Meeting	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/19/2018	Payee name Fuddruckers
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Amount (\$) 34.80	Payee address; City; State; Zip Code 711 W. Hillside Rd Laredo, Texas 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ meeting	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/24/2018	Payee name Lows
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Amount (\$) 21.29	Payee address; City; State; Zip Code 6623 San Dario Ave , Laredo Texas 78041
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Material for signs	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 9/24/2018		5 Payee name The Home Depot			
6 Amount (\$) 32.85		7 Payee address; City; State; Zip Code 5710 San Bernardo Ave Laredo, Texas 78041			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Materials		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/24/2018		Payee name The Home Depot			
Amount (\$) 96.16		Payee address; City; State; Zip Code 5710 San Bernardo Ave Laredo, Texas 78041			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Materials		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/25/2018		Payee name Print & More			
Amount (\$) 500.00		Payee address; City; State; Zip Code 3911 Jaime Zapata Memorial Hwy, Laredo Texas 78043			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertisement		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 9/27/2018		5 Payee name Jet Bowl North			
6 Amount (\$) 14.34		7 Payee address; City; State; Zip Code 5823 McPherson Rd Laredo, Texas 78041			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/ Meeting		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/27/2018		Payee name Lamar Media			
Amount (\$) 1,050.00		Payee address; City; State; Zip Code 5543 E. Highway 359 Laredo, Texas 78046			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/ meeting		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/30/2018		Payee name IBC			
Amount (\$) 21.16		Payee address; City; State; Zip Code 1200 San Bernardo Ave , Laredo Texas 78041			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Analysis Charge		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 10/1/2018		5 Payee name Urbano Rosas			
6 Amount (\$) 60.00		7 Payee address; City; State; Zip Code Laredo, Texas			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Campaign Volunteer		(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/2/2018		Payee name Mundo Publicitario			
Amount (\$) 200.00		Payee address; City; State; Zip Code Laredo, Texas			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertisement		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/2/2018		Payee name Rafael Garcia			
Amount (\$) 625.00		Payee address; City; State; Zip Code Laredo Texas			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertisement		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom investment is purchased	
	6 Address of person from whom investment is purchased; City; State; Zip Code	
	7 Description of investment	
	8 Amount of investment (\$)	
Date	Name of person from whom investment is purchased	
	Address of person from whom investment is purchased; City; State; Zip Code	
	Description of investment	
	Amount of investment (\$)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Business name
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6 Amount (\$)	7 Business address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

2 FILER NAME:
Jesus M.
Dominguez

3 Filer ID (Ethics Commission Filers)

LENDER
INFORMATION

4 Name of lender

Jesus M. Dominguez

5 Lender address; City; State; Zip Code
201 W. Hillside Suite
17 Laredo, Texas
78041

GUARANTOR
INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR
INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR
INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER
INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR
INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The Instruction Guide explains how to complete this form.

1 Total pages Schedule M:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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