# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guid	le explains how to complete this form.  1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 COMMITTEE NAME		OFFICE USE ONLY		
Lavedo	Strong	Date Received		
4 COMMITTEE ADDRESS  Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE; ZIP CODE P. O. BOX 451562/ LOVEDO, TX. 78045	Date Hand-delivered or Date Postmarked		
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI A WW	Receipt # Amount \$		
	NICKNAME LAST SUFFIX SOENZ	Date Processed  Date Imaged		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: 405 N. Ux bahn Ave Layedo, Tx. 78043	ZIP CODE		
7 CAMPAIGN TREASURER MAILING ADDRESS  Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (956) 763-9967			
9 REPORT TYPE	January 15  July 15  Bih day before election  Runoff	Exceeded \$500 limit  Dissolution (Attach PAC-DR)  10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year PT/01/2016 THROUGH	Month Day Year 09/30/2016.		
11 ELECTION	ELECTION DATE  Month Day Year Primary Runoff Other Description  General Special	E		
	GO TO PAGE 2			

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

### FORM SPAC COVER SHEET PG 2

2 COMMITTEE NAME		13	Filer ID (Ethics Commission Filers)	
4 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)	CANDIDATE	CANDIDATE/OFFICEHOLDER NAME		
SUPPORT (Candidate or Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
OPPOSE (Candidate or Measure)				
ASSIST (Officeholder)	MEASURE	BALLOT IDENTIFICATION /#  BALLOT IDENTIFICATION /#  Month Day Year      8   6		
		Laredo City Charter Amendme Mayor and Council Members	rits related to	
5 CONTRIBUTION TOTALS	1. TOTAL POLITICAL PLEDGES, LOAN:			
EXPENDITURE TOTALS	TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 3,340,00.	
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		ZED \$ _ O -	
	4. TOTAL POLITICAL EXPENDITURES		\$ 1,209.44	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORT	OTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2,130.50		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL LAST DAY OF THE			
6 AFFIDAVIT				
Notary	ANY L. FRANKLIN Public, State of Texas L. Expires 11-13-2019 DITY ID 130439701	I swear, or affirm, under penalty of perjur report is true and correct and includes a be reported by me under Title 15, Election	Il information required to	
		Signature of Campaign 7	reasurer	
AFFIX NOTARY STAMP / SEAL	ABOVE			
Sworn to and subscribed b	pefore me, by the said	Ana Saenz	_, this the	
day of October	, 20 <u>  \                                   </u>	certify which, witness my hand and seal of of	fice.	
July K. ma	nkli Tiffi	any L. Franklin Denir	tu City Servetani	
Signature of officer administr	ering oath Printed	name of officer administering oath Title	of officer administering oath	

# SUBTOTALS - SPAC

### FORM SPAC COVER SHEET PG 3

17	COMMITTEE NAME		
	18 Filer ID (Ethic		nmission Filers)
<del></del>	Lareclo Strong.		
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$3,340.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ O
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LA	BOR ORGANIZATION	\$ 250,00
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORGANIZATION	ORATION OR LABOR	\$ O
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABO	R ORGANIZATION	\$, )
7.	SCHEDULE E: LOANS		\$ 0
8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON	ITRIBUTIONS	\$Ō
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	41.	\$ <i>(</i> )
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL C	ONTRIBUTIONS	\$O
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ <i>O</i>
12.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$0
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	NTRIBUTIONS	\$ <sub>O</sub>
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	IS RETURNED	\$ <i>O</i>
***			

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME te 5 Full name of contributor out-of-state PAC (ID#: New Santa Fe Lta City: State: Zi 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) \$600.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date Amount of contribution (\$) #240,00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) 100.00 Laredo IX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:\_ Principal occupation / Job title (See Instructions) Employer (See Instructions)

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 SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME . 3 Filer ID (Ethics Commission Filers) Laredo 4 Date Full name of contributor out-of-state PAC (ID#:\_ 7 Amount of contribution (\$) address; and Blvd. Licity; State; Livido TX Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Contributor address; 4500.00 Laledo, TX Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#:\_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:\_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) 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 SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Laredo Date 5 Full name of contributor out-of-state PAC (ID#:\_ 7 Amount of contribution (\$) Kowan Rames \$20.00. Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#: Amount of contribution (\$) \$ 50.00 2420 Mier 78043 Lavedo Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) address; City; State; Zip Code atvo Viewo5 W Luvelo TX 7804 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:\_ \$ 30.00. Principal occupation / Job title (See Instructions) Employer (See Instructions) 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 SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Laredo 4 Date 5 Full name of Southerness 6 Contributor address; City; State; 170 Alwar Dr. Lando, TX out-of-state PAC (ID#:\_ 7 Amount of contribution (\$) \$200.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Daniel Manaway Contributor address; 6917 Danyow Rum Dr \$20,00 Principal occupation / Job title (See Instructions) Employer (See Instructions) arttorney Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) Gwlyddupe (Awales Contributor address; 9/16/16 State; Zip Code \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) attorney. Date out-of-state PAC (ID#:\_ Amount of contribution (\$) \$ 20.00-1120 Minutemen Dr. Principal occupation / Job title (See Instructions) Employer (See Instructions) rara-legal 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 SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Laredo out-of-state PAC (ID#: 7 Amount of contribution (\$) Castro & Co, LLC. City; State; Zip Code Orlando, Fl. 32801 - 3241 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) # 250.00 2118 Napoleon St Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Obintiago Sandoval 402 Washinaton St Principal occupation / Job title (See Instructions) Employer (See Instructions) attorney Date Full name of contributor Out-of-state PAC (ID#:\_ Amount of contribution (\$) Contributor address; State; Zip Code City; Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED if contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.