	CANDIDATE / O N FINANCE REP		₹	FORM JC/OH COVER SHEET PG 1
The JC/OH Instruction	n Guide explains how to co	mplete this form.	er ID	2 Total pages filed:
	· · · · · · · · · · · · · · · · · · ·			19
CANDIDATE / OFFICEHOLDER	MS/MRS/MR	FIRST Laura	MI L.	OFFICE USE ONLY
NAME	ļ			Date Received CAMERON COUNTY
	NICKNAME	LAST Betancourt	SUFFIX	DEPARTMENT OF ELECTIONS VOTER REGISTRATION
CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #: CITY:	ZIP COI	DE Date Hand-delivered or Date Postmarker 5
OFFICEHOLDER MAILING ADDRESS	100 Stillinger Dr.		2.11 301	Receipt# Amount
Change of Address	Brownsville , TX 78521			Dise Processed
				Date Imaged
CAMPAIGN TREASURER	MS/MRS/MR	FIRST		MI
NAME		Daklia		E.
	NICKNAME	LAST	***************************************	SUFFIX
		Betancour	+	
CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	APT/SUITE#; C	CITY; STATE; ZIP CODE
TREASURER ADDRESS		0	A	
(Residence or Business)		Harling.	avenwood en, TX 786	550
CAMPAIGN	AREA CODE PHO	ONE NUMBER EXTENS	SION	
TREASURER PHONE	956 7	93-4247		
REPORT TYPE	January 15	30th dáy before election	Runoff	15th day after campaign treasurer
	X July 15	8th day before election	Exceeded \$500 limit	appointment (officeholder only)
		Olivacy before election	LACEGUEU \$500 III III	Final Report (Added) C/On-FR)
PERIOD COVERED	Month Day Year			Day Year
	01/01/2015	THROUG	m 06/30	/2015
0 ELECTION	ELECTION DATE		ELECTION TYP	··
	Month Day Year 11/04/2014		Runoff	Other
	1275 (7252)	X General	Special	
1 OFFICE	OFFICE HELD (if any)		12 OFFICE SOU	GHT (if known)
	County Court at Law Jud	lge	County Cou	rt at Law Judge
·	<u> </u>	. ,		
		GO TO PA	GE 2	
orms provided by Te	xas Ethics Commission	www.ethics.sta	ate.tx.us	Version V1.0.28282

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH **COVER SHEET PG 2**

				2 of 19
13 C / OH NAME	Betancourt, Laura		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu . These expenditures may have been made without id officeholders are required to report this information	the candidate's or officeh	nolder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMPTEE ADDECO		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTIBUTION TOTALS	LOANS, OR GU	CAL CONTRIBUTIONS OF \$50 OR LESS (OTHER DARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.00
	1	FICAL CONTRIBUTIONS I PLEDGES, LOANS, OR GUARANTEES OF LOAN	10)	\$ 0.00
EXPENDITURE TOTALS	·	CAL EXPENDITURES OF \$100 OR LESS, UNLESS		\$ 534.81
	4. TOTAL POLIT	TICAL EXPENDITURES		\$ 5,313.77
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD	AST DAY OF THE	\$ 1,300.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
N. COE	Perla Cristal Diaz lotary Public, State of Texas My Commission Expires 05-07-2017	I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code. Signature of	all information required to	be reported by me
AFFIX NO	DTARY STAMP / SEAL AB	OVE		·
Sworn to and subs of <u>ゴルソ</u>	scribed before me, by the s	said Laura L Betarcourt certify which, witness my hand and seal of office.	, this the	day
Signature of offi	icer administering oath	Porta Cristal Diaz Printed name of officer administering oath	Notary Title of officer	Rublic administering oath

FORM JC/OH **SUBTOTALS - JC/OH COVER SHEET PG 3** 3 of 19 **18 FILER NAME** 19 Filer ID Betancourt, Laura 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE E(J): LOANS (JUDICIAL) \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \mathbf{X} \$ 5,313.77 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 11. X \$ 4,520.27 TO FILER

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expense Printing nmittee Legal Services Salaries		pense Travel Out of District ages/Contract Labor OTHER (enter a category not listed above)	
		.	The Instruction Guide explains how to d	comp	•	
1	Total pages Schedule F1:	1	FILER NAME	_	3 Filer ID	_
	Sch: 1/10 Rpt: 4/19		Betancourt, Laura			
4	Date	5	Payee name			
	06/05/2015		American Heart Association	_		
6	Amount (\$)	7	Payee address; City; State; Zip C	Code	le	-
	\$125.00		1210 W. Expressway 83			
			Harlingen, TX 78550			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b	(b) Description	
	EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas, Complete Schedule T.	1
ĺ			Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense Fundraiser for American Heart	,
	1				Turdiascrist American riegit	
9	Complete ONLY if direct	1_	Candidate/Officeholder name Office so		tht Office held	
١	expenditure to benefit C/OI		andidate/Officerroads frame	Jug.,	jit. Omoe neid	
	Date	-	Payee name	· · · · · · · · · · · · · · · · · · ·		=
	05/06/2015	ı	BISD Youth Ambassador Program			
	Amount (\$)	╄	Payee address; City; State; Zîp C		to.	_
İ	\$100,00		1900 E. Price Rd.	-040	ec	
	4200,00		1300 E. 1 1100 F. 12			
	!		Brownsville, TX 78521			
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	PURPOSE OF		Category (See Categories listed at the top of this schedule)	(D	(b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense	
					Graduation	
		<u> </u>				
	Complete ONLY if direct		Candidate/Officeholder name Office so	ough	ht Office held	-
	expenditure to benefit C/OI	Н				
	Date		Payee name			_
	06/06/2015		Best Buy			
	Amount (\$)		Payee address; City; State; Zip C	Code	le	
	\$1,439.67		2701 Pablo Kisel Blvd.			
ĺ	!					
			Brownsville , TX 78526			
	PURPOSE		Category (See Categories listed at the top of this schedule)	(b	(b) Description	_
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.	
					Check if Austin, TX, officeholder tiving expense Apple Computer	
					Apple Computer	
	Complete ONLY if direct		Candidate/Officeholder name Office so	<u> </u>	ht Office held	_
	expenditure to benefit C/OI			, .		
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						- 1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Food/Beverage Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense 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 Sch: 2/10 Rpt: 5/19 Betancourt, Laura 4 Date Payee name 01/05/2015 Betancourt, Laura Pavee address: Amount (\$) City; State; Zip Code \$140.00 100 Stillinger Dr. Brownsville, TX 78521 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Partial Reimbursement Apple computer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/07/2015 Betancourt, Laura Amount (\$) Payee address: City; State; Zip Code \$200.00 100 Stillinger Dr. Brownsville, TX 78521 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Partial Reimbursement Apple Computer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/12/2015 Betancourt, Laura Amount (\$) Payee address: City; State; Zip Code 100 Stillinger Dr. \$160.00 Brownsville, TX 78521 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description ΩE Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Partial Reimbursement Apple Computer Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement
Office Overhead/Rental Expense Event Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gilt/Awards/Memorials Exp Legal Services The Instruction Guide	ense Prin Sala	_	e /Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed a	above)
1	Total pages Schedule F1:	2 FILER NAME			<u>.</u>		3 Filer ID	
	Sch: 3/10 Rpt: 6/19	Betancourt,						
4	Date	5 Payee name	•	•				
	01/24/2015	Betancourt,	Laura					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zij	p Code		,	
	\$200.00	100 Stilling	er Dr.					
		Brownsville	, TX 78521					
8	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Loan Repay	/ment/Reimbursem	nent		<u></u>	outside of Texas. Complete Schedule T.	
						Partial Reimb	TX, officeholder living expense	
						Apple Compt		
_	Consolate ONLY if disease	0		05.				
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Опісе	sought		Office held	
	Date	Payee name			•			
	01/21/2015	Betancourt,	Laura					
	Amount (\$)	Payee addre	ss; City;	State; Zij	p Code	······································		
	\$200,00	100 Stilling	er Dr.					
		Brownsville	, TX 78521					
	PURPOSE	(a) Category (s	ee Categories listed at the to	an of this echodula)	(b)	Description		
	OF		/ment/Reimbursem		, [outside of Texas. Complete Schedule T.	
1	EXPENDITURE	,	, , , , , , , , , , , , , , , , , , , ,			Check if Austin,	TX, officeholder living expense	
ŀ						Partial Reimb		
						Apple Compu	iter	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office	sought	•	Office held	
_		<u>,</u>						
	Date 04/00/04/	Payee name	Lavas					
	01/02/2015	Betancourt,	·			<u> </u>		
	Amount (\$)	Payee addre		State; Zi	p Code			
	\$200.00	100 Stilling	er Dr.					
		Brownsville	, TX 78521					
	PURPOSE	(a) Category (s	ee Categories listed at the to	op of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Expe	-				outside of Texas. Complete Schedule T.	
	EXI ENDITORE	:				_	TX, officeholder living expense	
						Swearing-In Expenses		
ļ			·			-vhenses		
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office	sought		Office held	. —
	experience to benefit C/Or	·						

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Poling Expense Printing Expense Travel in District Gift/Awards/Memorials Expense Travel Out of District Salaries/Wages/Contract Labor 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 Sch: 4/10 Rpt: 7/19 Betancourt, Laura 4 Date Payee name 02/25/2015 Betancourt, Laura Amount (\$) Payee address: City; State; Zip Code \$100.00 100 Stillinger Dr. Brownsville, TX 78521 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Partial Reimbursement Apple Computer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/12/2015 Betancourt, Laura Amount (\$) Payee address: City; State; Zip Code \$80,00 100 Stillinger Dr. Brownsville, TX 78526 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Fix broken glass on IPhone used for Campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/01/2015 Brooks, Gloria (Mrs.) Amount (\$) Payee address; City; State; Zip Code \$200,00 132 W. Levee St. Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF **Event Expense** Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Swearing-in Cameron County Courthouse Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - al Committee I	Git/Awards/Memorials Exp Legal Services	pense Pa Sa		ense ges/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
_	Total pages Schedule F1:		The Instruction Guide) exhigins no	N to com	piete trus ionii.	Т,		-, -
1	Sch: 5/10 Rpt: 8/19	Betancourt,					3	Filer ID	
_	Date		Luciu			· · · · · · · · · · · · · · · · · · ·	Д_		
**	05/18/2015	5 Payee name Canales Ele	ementary School					•	
		<u> </u>		21:4	- 0.4				
b	Amount (\$)	7 Payee addres	•	State; Z	Zip Coue)			
	\$100.00	1811 Interna	dional bivu.						
		Brownsville,	TX 78521						
8	PURPOSE	(a) Category (Se	e Categories listed at the to	on of this schedu	(ab	Description		· · · · · · · · · · · · · · · · · · ·	
	OF EXPENDITURE	Contribution	s/Donations Made	е Ву		Check if trave		ide of Texas. Complete Schedule T.	
İ	EXPENDITORE		Officeholder/Politica		ee			officeholder living expense	
	!					Teacher Ap	preu	lation Week	
_	~ ONLY II divant	2 - 2-1-1-1066	× • • • • • • • • • • • • • • • • • • •						 -
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	eholder name	Offic	ce sough	ıt		Office held	
	Date	Payee name							
	05/18/2015	Diaz, Perla							
	Amount (\$)	Payee addres	ss; City;	State; Z	Zip Code	3			
	\$100.00	974 E. Harris	son St.						
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	!	Brownsville,	TX 78526						
	PURPOSE	(a) Category (Se	e Categories listed at the to	op of this schedu	le) (t) Description			-
	OF EXPENDITURE	1	age Expense	·	~	Check if trave		de of Texas. Complete Schedule T.	
	by bineria.	İ				—		officeholder living expense	
	!					F000 and be	ever	age for Jurors	
	Complete ONLY if direct	Candidate/Offic		Offic		 		Arr - 1-11	
	expenditure to benefit C/O		enoider haine	Oline	ce sough	it		Office held	
_	·					-v			
ł	Date	Payee name	24.00						
	02/16/2015	Girl Scout Tr		 					
	Amount (\$)	Payee addres	<u> </u>	State; Z	ip Code	;			_
	\$100.00	1322 E. Tyle	r Ave.						
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		Harlingen, T.	X 78550						
	PURPOSE		e Categories listed at the to		te) (t	Description		· ,, <u>, , , , , , , , , , , , , , , , , </u>	
	OF EXPENDITURE		s/Donations Made					de of Texas. Complete Schedule T.	
		Candidate/O	Officeholder/Politica	al Commue	³e			officeholder living expense roop Leader	
	•					Trip to Europ		100p Ecadei	
	Complete ONLY if direct	Candidate/Offic	abolder name	Offic	ce sough			Office held	
	expenditure to benefit C/O		official figure	O.M.	A Jourg.	14		Onice negu	
		 							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) rtising Expense Event Expense Loan Repayment/Reimbu

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

Event Expense
Fees
Food/Beverage Expense
Glift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Soficitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expens Legal Services The Instruction Guide or	Salaries/	Expens /Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
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T	Total pages Schedule F1:	1				,	3	Filer ID	
L	Sch: 6/10 Rpt: 9/19	Betancourt,	Laura	·			L		
4	Date	5 Payee name							
_	01/31/2015	Internationa	al Bank of Commerce	3					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode		-		
	\$13,54	1600 Ruber	n Torres Blvd.						
	· ·								
	!	Brownsville	. TX 78526						
8	PURPOSE	ļ		*** 1 total	(h)	Description			
٦	OF	Accounting/	ee Categories listed at the top o /Ranking	of this schedule)	(2)	_	outsid	le of Texas, Complete Schedule T.	
İ	EXPENDITURE	Accounting	Danking			<u> </u>		officeholder living expense	
	!	1				January			
	!	1				Bank Fees			
9	Complete ONLY if direct		iceholder name	Office so	ught			Office held	
ŀ	expenditure to benefit C/Oi	н							
-	Date	Payee name							
	02/28/2015	l i	al Bank of Commerce	3					
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	\$12.98	1	n Torres Blvd.	State, Lip C	uuc				
	Ψ12.50	TOOU IVADO	1 TOHES DIVU.						
	!		-						
	<u></u>	Brownsville	, TX 78526						
	PURPOSE OF		ee Categories listed at the top o	of this schedule)	(b)	Description	-		
	OF EXPENDITURE	Accounting/	Banking Banking					le of Texas, Complete Schedule T.	
	1	1				February	i, TX, 0	officeholder living expense	
	†	1				Bank Fees			
<u> </u>	Complete ONLY if disput	2 -414 ntn/0#		Office or	<u> </u>				
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ugnt			Office held	
						•			
	Date	Payee name						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	03/31/2015	Internationa	al Bank of Commerce)					
Г	Amount (\$)	Payee addres	ss; City;	State; Zîp Cı	ode			· · · · · · · · · · · · · · · · · · ·	_
	\$58.07	1600 Ruber	n Torres Blvd.						
	†								
	!	Brownsville	TX 78526						
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	PURPOSE OF	1	ee Categories listed at the top o	of this schedule)	(D)	Description	outeid	le of Texas. Complete Schedule T.	
	EXPENDITURE	Accounting/	Banking					e or rexas. Complete Schedule 1. officeholder living expense	
	1					March		Mindred and and	
	!		•			Bank Fees			
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sor				Office held	_
	expenditure to benefit C/O		benefact name	Omoc co.	ացու			Office field	
\vdash			,						
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed shove)

	Candidate/Officeholder/Politica	mmittee Legal Services Salaries The Instruction Guide explains how to c	Wages/Contract Labor OTHER (enter a category not listed above) omplete this form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID
	Sch: 7/10 Rpt: 10/19	Betancourt, Laura	
4	Date	Payee name	
L	04/30/2015	International Bank of Commerce	
6	Amount (\$)	Payee address; City; State; Zip C	ode
	\$14.40	1600 Ruben Torres Blvd.	
	!		
_	!	Brownsville, TX 78526	
8	PURPOSE	Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas, Complete Schedule T.
	!		Check if Austin, TX, officeholder living expense April
	!		Bank Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
	expenditure to benefit C/OI	THE CONTRACT OF THE CONTRACT O	Jyiii
⊨	Date	Payee name	
	05/31/2015	International Bank of Commerce	ı
┝	Amount (\$)	Payee address; City; State; Zip C	nde
	\$23.26	1600 Ruben Torres Blvd.	Jue -
	• -	1000 ((100))	
	<u>.</u>	Brownsville, TX 78526	
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	(b) Description
Ì	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!		May Total
ĺ	!		Bank Fees
一	Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	06/30/2015	International Bank of Commerce	
一	Amount (\$)	Payee address; City; State; Zip C	ode
	\$12.42	1600 Ruben Torres Blvd.	
	!		
	!	Harlingen, TX 78526	
一	PURPOSE	Category (See Categories listed at the top of this schedule)	(b) Description
İ	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas, Complete Schedule T.
	LAF LIMIT VIS.	·	Check if Austin, TX, officeholder living expense
	!		June Bank Fees
<u> </u>	Consolate ONLV if direct	Office of	
l	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office so	ught Office held
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Fees
Food/Beverage Expense
Giff/Awards/Memorials Expense
Printing Expense
Printing Expense

ent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Contributions/ Donations Made 8 Candidate/Officeholder/Politics		Gift/Awards/Memorials Expe Legal Services	ense Prir	nting Expens nting Expensional laries/Wage		Travel Out of District OTHER (enter a category not li	sted above)
L			The Instruction Guide	explains how	to compl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAM	É				3 Filer ID	.,
L	Sch: 8/10 Rpt: 11/19	Betancourt	·		·			
4	Date	5 Payee name	!					
	05/04/2015	Johnny Ca	rinos 38					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zi	p Code			
	\$11.73	2600 US 7	7					
		Brownsville	e, TX 78526					
8	PURPOSE	(a) Category (5	iee Categories listed at the top	of this schedule	(b)	Description		
	OF EXPENDITURE		rage Expense	, at also portogolo,	′ ``	_	outside of Texas. Complete Schedule	т.
ŀ	EXPENDITORE		- ,			Check if Austin	, TX, officeholder living expense	
		İ				Lady Barriste	ers lunch	
L								
9			iceholder name	Office	e sought	-,	Office held	
	expenditure to benefit C/O	H						
	Date	Payee name						
	04/22/2015	Johnny Car	inos 38					
 	Amount (\$)	Payee addre		State; Zir	n Code			,,,
	\$60.18	2600 US 77	- ·		p Ocac			
	400.10	2000 00 //	1					
		B	TV 70500		•			
		Brownsville	, 1X 78526					
	PURPOSE OF		ee Categories listed at the top	of this schedule)) (b)	Description		
	EXPENDITURE	Food/Bever	rage Expense				outside of Texas. Complete Schedule	τ.
						Meeting with	, TX, officeholder living expense	
						wiceding with	Consulatins	
┝	Complete ONLY if direct	Candidate/Off	iceholder name	Office	sought		Office held	
	expenditure to benefit C/O	H	Centilica Hairie	Office	; sought		Office field	
\vdash								
	Date	Payee name						
	01/26/2015	Johnny Car	inos 38					
	Amount (\$)	Payee addre	ss; City;	State; Zip	o Code			
	\$29.04	2600 US 77	•					
		Brownsville	, TX 78526					
	PURPOSE	(a) Category /s	ee Categories listed at the top	of this schodule)	(b)	Description		
	OF EVERNORE INC		age Expense	or alis scriedale)			outside of Texas. Complete Schedule	₹.
	EXPENDITURE					Check if Austin	, TX, officeholder living expense	
						Meeting with	Constituents	
	Complete ONLY if direct		ceholder name	Office	sought		Office held	,
	expenditure to benefit C/OF	4						
-								

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

and the second	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		mmittee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services			xpens Vages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	I
				The Instruction Guid	e explains i	how to co	mple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME	Ē				ļ	3	Filer ID	
	Sch: 9/10 Rpt: 12/19		Betancourt,	, Laura							
4	Date	5	Payee name)					<u> </u>		
-	05/12/2015			nontessori School							
6	Amount (\$)	╁	Payee addre	ess; City;	State:	Zip Co					
	\$100.00		2734 N. Co		out,		luc				
į	ΦΤΟ Φ-0-0		Z/ UM 14, QU	41a St.							
See Line	,										
			Brownsville	e, TX 78520-8841	· · · · · · · · · · · · · · · · · · ·						
8	PURPOSE	(a)		See Categories listed at the t		edule)	(b)	Description			
	OF EXPENDITURE		Contribution	ns/Donations Made	е Ву			<u></u>		de of Texas. Complete Schedule T.	
			Candidate/	Officeholder/Politic	al Commi	ittee		I		officeholder living expense	
	+	ĺ				ļ	ľ	Teacher Appr	reci	ation week	
Ļ		<u></u>									
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ficeholder name	O	Office sou	ght			Office held	
F	Date	Т	Рауее пате								
	01/24/2015		Mi Pueblito								
<u> </u>		╀								<u> </u>	
	Amount (\$)		Payee addre	• •	State;	Zip Co	ae				
	\$40.00		3101 Pablo	Kisel							
	!										
	!		Brownsville	e , TX 7 8526							
Г	PURPOSE	(a)	Category (S	See Categories listed at the to	ton of this sch	edule)	(b)	Description			
	OF EXPENDITURE			rage Expense	-F	,		`	outsid	de of Texas. Complete Schedule T.	
	EXPENDITURE			•						officeholder living expense	
	ļ							Meeting with	Cor	nstituents	
		_									
	Complete ONLY if direct		Candidate/Offi	ficeholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/OI	Н									
F	Date	Г	Payee name							Marine Committee Committee Committee Committee Committee Committee Committee Committee Committee Committee Com	
	01/12/2015		Southwest /								
_		 			Ctoto	7:- Co	٠				
	Amount (\$)		Payee addres		State,	Zip Co	de				
	\$829.40		2730 Airpor	t Drive							
	,										
			Harlingen, 1	TX 78550							
 	PURPOSE	(a)	Category (s	See Categories listed at the to	top of this schr	(aluba	(b)	Description			
l	OF		Travel Out		op or and ad	auis)			outsid	de of Texas. Complete Schedule T.	
	EXPENDITURE									officeholder living expense	
	. !							Colorado eve	nt		
	Complete ONLY if direct		Candidate/Offi	iceholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/OI	H					•				
 	,							 			· · · · ·
ŀ											

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		mittee	Gift/Awards/Memorials Legal Services The Instruction Ge	s Expense		xpens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed ab	ove)
1	Total pages Schedule F1:	2 1	FILER NAME	 				7.0	3	Filer ID	
_	Sch: 10/10 Rpt: 13/19	1	Betancourt,						ľ	THE ID	
4	Date	5 F	Payee name	:	· · · · · · · · · · · · · · · · · · ·			···	_		
	05/04/2015	-	Toscafino								
6	Amount (\$)	7 F	Payee addre	ess; City;	State	e; Zip Co	de				
	\$66.45	1	3001 Pablo	Kisel Ste. N							
			Brownsville	e , TX 78526							
8	PURPOSE	(a) (Category (s	See Categories listed at t	the top of this scf	hedule)	(b)	Description			
ĺ	OF EXPENDITURE			rage Expense	•	· /	1	Check if travel of		de of Texas, Complete Schedule T.	
	MAN MINER COLL	!						Check if Austin, Meet with Co		officeholder living expense ituents	
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	iceholder name	(Office sou	ght			Office held	
	Date	1	Payee name								
_	04/27/2015		Toscafino			<u> </u>		<u></u>	_		
	Amount (\$)	ł	Payee addre:	•	State	e; Zip Co	de		_		
	\$35.32	3	3001. Pablo	Kisel Ste. N							
		 		e, TX 78526	·	<u> </u>	T			, 30,735	
	PURPOSE OF			ee Categories listed at th	the top of this sch	nedule)	(b)	Description	~utoi:	de of Tayon Commisto Cabadido T	
	EXPENDITURE		-oog/Bever	rage Expense		1		=		de of Texas, Complete Schedule T. officeholder living expense	
	1					1	1	Meeting with			
	1					}	ĺ				
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	iceholder name	(Office sou	ght			Office held	
	Date	F	Payee name						_		
	01/12/2015	7	Toscafino								
Π	Amount (\$)	F	Payee addres	ss; City;	State	e; Zip Co	de	· · · · · · · · · · · · · · · · · · ·			
	\$27.50	[;	3001 Pablo	Kisel Ste. N				•			
		E	Brownsville	, TX 78526							
	PURPOSE OF			ee Categories listed at th	the top of this sch	nedule)	(b)	Description		······	
	EXPENDITURE	F	Food/Bever	rage Expense		•	i '			de of Texas. Complete Schedule T. officeholder living expense	
	l	ļ				•		Met with Cons			
	1					ļ	ĺ			20110	
	Complete ONLY if direct	I Cr	andidate/Offi	iceholder name		Office sou	aht			Office held	
	expenditure to benefit C/O					5	9			Cinco nois	

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

SCHEDULE K

L						· ·	
	The Instru	cti	on Guide explains how to complete this form.	1		ages Schedule K: /2 Rpt: 14/19	,
2	FILER NAME			3	Filer ID)	
	Betancourt,	Laı	ıra				
4	Date	5	Name of person from whom amount is received	<u> </u>		8 Amount (\$)	·
	04/10/2015		Betancourt, Laura				\$1,235.60
ľ		6	Address of person from whom amount is received; City; State; Zip Code	•••••	***********	1	
			100 Stillinger Dr.				
			Brownsville , TX 78521				
		7	The state of the s			ribution returned to f	iler
			Received reimbursement from Cameron County for Judicial conferences pa	aid v	with pol	litical funds	
	Date	Γ	Name of person from whom amount is received	,		Amount (\$)	
	04/10/2015		Betancourt , Laura			ļ	\$564.67
l			Address of person from whom amount is received; City; State; Zip Code	******	************		
			100 Stillinger Dr.				
			Brownsville, TX 78521				
ŀ						ribution returned to f	iler
		L	Received reimbursement from Texas Center for Judiciary for Conference p	aid	from po	olitical funds	
	Date		Name of person from whom amount is received			Amount (\$)	
	01/20/2015		Betancourt, Laura				\$500.00
			Address of person from whom amount is received; City; State; Zip Code				
			100 Stillinger Dr.				
			Brownsville , TX 78521				
		┝		olitic	ral contr	l ribution returned to f	iler
			Reimbursement for Florida hotel	Ontro	Jan 50110	Date of total float to t	
-	Date	<u> </u>	Name of person from whom amount is received			Amount (\$)	
	02/02/2015		Betancourt, Laura			Апюши (ф)	\$300.00
	0E/0E/E013	ļ	Address of person from whom amount is received; City; State; Zip Code		***********		Φ300.00
			100 Stillinger Dr.				
			100 Smilliger Dr.				
			Brownsville , TX 78521				
				olitic	cal contr	ibution returned to f	iler
			Partial Reimbursement for Southwest Airline Flight				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/27/2015		Betancourt, Laura				\$300.00
		·	Address of person from whom amount is received; City; State; Zip Code	,,.			
			100 Stillinger Dr.				
		ŀ	Brownsville , TX 78521				
		H		olitic	eal contr	ibution returned to f	ilor
			Partial Reimbursement for Southwest Airline flight	Jill	AN WOUL	Total Total Ties (V f	ii 🗸
\vdash		L					· · · · · · · · · · · · · · · · · · ·
l							

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 15/19 2 FILER NAME 3 Filer ID Betancourt, Laura 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 04/10/2015 Betancourt, Laura \$1,620.00 6 Address of person from whom amount is received; City; State; Zip Code 100 Stillinger Dr. Brownsville, TX 78521 Purpose for which amount is received Check if political contribution returned to filer Total Reimbursements for Apple Computer Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.28282

ASSETS VALUED AT \$500 OR MORE	SCHEDULE M
The Instruction Guide explains how to complete this form.	1 Total pages Schedule M: Sch: 1/1 Rpt: 16/19
2 FILER NAME Betancourt, Laura	3 Filer ID
4 Description of Asset Apple Computer	
Forms provided by Texas Ethics Commission www.ethics.state.tx.us	V1.0.2828

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 17/19 2 FILER NAME 3 Filer ID Betancourt, Laura 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 Schedule F2 Schedule G Schedule H Schedule COH-UC Schedule B - SS 6 Dates of Travel Name of person(s) traveling Laura Betancourt, Laurisa Serra 8 Departure city or name of departure location 01/30/2015 Harlingen, Texas 9 Destination city or name of destination location 02/01/2015 Denver, Colorado 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Colorado event

TEXT ANNOTATION		
		Sch: 1/2 Rpt: 18/19
FILER NAME Betancourt, Laura	Filer ID	
Schedule G		
Information entered by filer as a memo:		

www.ethics.state.tx.us

V1.0.28282

Forms provided by Texas Ethics Commission

TEXT ANNOTATION			
			Sch: 2/2 Rpt: 19/19
FILER NAME Betancourt, Laura		Filer ID	
Schedule M			
Information entered by filer as a memo:	· · · · · · · · · · · · · · · · · · ·		
orms provided by Texas Ethics Commission	www.ethics.state.tx.us		V1.0.2828