Dalila Esquivel

From:

do-not-reply@ethics.state.tx.us

Sent:

Thursday, July 02, 2015 9:47 AM

To:

Dalila Esquivel

Subject:

70,40

00019971 Texas Ethics Commissions Electronic Filing System Acknowledgment

Texas Campaign Finance Report Filing Acknowledgement for Benjamin Euresti (Filer ID:00019971). This is to acknowledge the receipt and acceptance of your electronic filing. Your filing for Benjamin Euresti (Filer ID:00019971) was received and accepted by our system at Thu Jul 02 09:46:37 CDT 2015 and was assigned the report number of: TX-100260438. Please keep this acknowledgment, as it may be necessary to refer to it in the future.

CAMERON COUNTY
DEPARTMENT OF ELECTIONS &
VOTER REGISTRATION

0 2 20

@10:15Am

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH **COVER SHEET PG 1**

		41.1.	1 Filer ID		2 Total pages f	iled:
The JC/OH Instruction G	Guide explains how to complete	tnis form.	(Ethics Commit 00019971	•		39
3 CANDIDATE/	MS/MRS/MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Benjamin			Date Received	·
· · · · · · · ·					ELECTRONIC	ALLY FILED
	A HOLA LABAT	I A CT		amanaman on incliv	07/02/2015	
	NICKNAME	LAST		SUFFIX	0770272010	
		Euresti				
4 CANDIDATE/	ADDRESS / PO BOX; APT /	SUITE#; CIT	ΓY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	974 E. Harrison					
ADDRESS					Receipt #	Amount
Change of Address	Brownsville, TX 78520				D. 1. D	
					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS/MRS/MR	FIRST			MI	
TREASURER	Mrs.	Berlinda				ON COUNTY
NAME	IVII 5.	Derinida			NEDARTMEN	TOFELEGIONE A
	AND DATA AND AND		*************************		بأدواها فسأد وتنادك البياد مدمد و و و و المار و و و و و و و و و و و و و و و و و و و	REGISTRATION
	NICKNAME	LAST			SUFFIX *	10:15
		Euresti			JUL	0 2 2015
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP'	T / SUITE #; CITY		ATE ZIP CODE
ADDRESS	32364 San Carlos Rd.			/	By	A STANDARD WAS ARRESTED AND STANDARD STANDARD STANDARD STANDARD STANDARD STANDARD STANDARD STANDARD STANDARD S
(Residence or Business)					E Y	
, , , , , , , , , , , , , , , , , , ,	Los Fresnos, TX 78566			/		101
					\setminus \nearrow	'
7 0440404	ADEA CODE DUON	ENUMBER	EVELLEION		The Confession of the Confessi	
7 CAMPAIGN TREASURER	1	E NUMBER	EXTENSION		· .	
PHONE	(956) 592-0236					
8 REPORT						
TYPE	January 15	30th day befor	e election	Runoff	15th day after c	ampaign treasurer
		J J			appointment (of	
	X July 15	8th day before	election	Exceeded \$500 limit	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	y Year	
COVERED	01/01/2015	Т	HROUGH	06/30/20)15	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/04/2014		General	Special		
				الساء ا		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
TT OFFICE	District Judge District 107			District Judge I	•	
	District study: District 107			Pistrict studge i	JOHN LUI	
		GO '	TO PAGE 2			
						V

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

2 of 39

13 C / OH NAME	Euresti, Benjamin (Th	e Honorable)	14 Filer ID 00019971	(Ethics Commission Filers					
15 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.								
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL	COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS						
16 CONTIBUTION TOTALS	1. TOTAL POLITIC LOANS, OR GU	I	THAN PLEDGES,	\$ 0.0					
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAI	VS)	\$ 0.0					
EXPENDITURE TOTALS	3. TOTAL POLITIC	\$ 0.							
	4. TOTAL POLIT	4. TOTAL POLITICAL EXPENDITURES							
CONTRIBUTION BALANCE	•	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS A ITING PERIOD	S OF THE LAST DAY	\$ 0.					
17 AFFADAVIT	•	I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information require	accompanying report is d to be reported by me					
	OTARY STAMP / SEAL AB	ove tiled 7/2/15 Accepted	orable Benjamin Eu of Candidate or Officel T t t t t t t t t t t t t						
of		ertify which, witness my hand and seal of office. Printed name of officer administering oath		cer administering oath					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 39

			3 of 39						
18 FILER NAMI Euresti, Be	B FILER NAME 19 Filer ID (Ethics Commission Filers) Euresti, Benjamin (The Honorable) 00019971								
20 SCHEDULE NAME OF S		SUBTOTAL AMOUNT							
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	" ·	\$ 0.00						
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00						
3. X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$ 0.00						
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 0.00						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 8,586.48						
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 0.00						
9. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
10	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
11.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						

PLEDG	ED CONTRIBUTIONS (JUDICIA	AL)		SCHEDULE B(J)	
The I	nstruction Guide explains how to complete th	1 Total pages Sche Sch: 1/1 Rpt: 4			
2 FILER NAME Euresti, Benj	jamin (The Honorable)	3 Filer ID (Et 00019971	hics Commission Filers)		
4 TOTAL OF	UNITEMIZED PLEDGES		\$ 0.00		
5 Date	6 Full name of pledgorout-of-state PAC (ID#:		8 Amount of pledge (\$)	9 In-kind description (If applicable)	
		To a constant	Check if travel ou	I I I Istside of Texas. Complete Schedu	ıle T.
10 Pledgor's prin	cipal occupation	11 Pledgor's job title			
12 Pledgor's emp	oloyer/law firm	13 Law firm of pledgor's	spouse (if any)		
14 If pledgor is a	child, law firm of parent(s) (if any)	·			

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	 Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	ense Printing	Expens Expens s/Wages		7	Fravel in District Fravel Out of Dis DTHER (enter a		:)
			The Instruction Guide e	xplains how to cor	nplete 1	this form.				
1	Total pages Schedule F1:	2 FILER NAM	IE				3 F	er ID	(Ethics Commission	Filers)
	Sch: 1/35 Rpt: 5/39	Euresti, Bo	enjamin (The Honora	ıble)				00019971		
4	Date	5 Payee nam	е				·L·	· · · · · · · · · · · · · · · · · · ·		
	06/17/2015	Arnie's Wi	nghouse							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code					
	\$58.76	812 S. Arr	oyo							
		Los Fresn	os, TX 78566							
8	PURPOSE	(a) Category	See Categories listed at the to	n of this echadule)	(b)	Description				
	OF EVDENDITUDE		erage Expense	p of this sericulicy	``		outside	e of Texas. Com	plete Schedule T.	
	EXPENDITURE		-			ш.		fficeholder living	g expense	
						Pace teacher	rs			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		fficeholder name	Office s	ought			Office h	eld	
	Date	Payee nam	e							***************************************
	05/13/2015	BJ's Resta	aurant							
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				1-71-1	
	\$23.57	5929 W. V	Vaco Boulevard							
		Waco, TX	76710							
	PURPOSE	(a) Category	See Categories listed at the to	n of this schedule)	(b)	Description				
	OF EXPENDITURE		erage Expense	,		Check if travel			plete Schedule T.	
	EXPENDITORE					Check if Austin			g expense	
						Dallas Judici	ai C	merence		
	Complete ONLY if direct	CandidatalO	fficeholder name	Office	ought.		····	Office h	ald	
	Complete ONLY if direct expenditure to benefit C/Oh		incendider name	Office s	ougni			Office fi	eiu	
	Date	Payee nam								
	05/14/2015	BJ's Resta								
	Amount (\$)	Payee addr	-	State; Zip	Code					
	\$101.06	5929 W. V	Vaco Boulevard							
		\\/a T\/	76710							
		Waco, TX								
	PURPOSE OF		See Categories listed at the to	p of this schedule)	(b)	Description Check if travel	nuteid	antTevae Com	plete Schedule T.	
	EXPENDITURE	Food/BeV	erage Expense			ш		e or rexas. Con officeholder living	•	
						Dallas Judici				
	Complete ONLY if direct		fficeholder name	Office s	ought			Office h	eld	
	expenditure to benefit C/OI	4								

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

	Candidate/Officeholder/Politica	Committee Legal Services 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: Sch: 2/35 Rpt: 6/39	2 FILER NAME Suresti, Benjamin (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019971
4	Date 02/12/2015	5 Payee name Best Buy
6	Amount (\$) \$49.78	7 Payee address; City; State; Zip Code 2701 Pablo Kisel Boulevard Brownsville, TX 78520
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Adapter for work phone
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/21/2015	Payee name Best Buy
	Amount (\$) \$34.63	Payee address; City; State; Zip Code 2701 Pablo Kisel Boulevard Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office equipment
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/09/2015	Payee name Bigo's Restaurant
	Amount (\$) \$189.90	Payee address; City; State; Zip Code 464 Paredes Line Road Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hanna High School graduates and parents
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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

	Candidate/Officeholder/Politica	I Committee Legal Services 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: Sch: 3/35 Rpt: 7/39	2 FILER NAME Euresti, Benjamin (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019971
4	Date 06/12/2015	5 Payee name Blackbeards Restaurant
6	Amount (\$) \$140.41	7 Payee address; City; State; Zip Code 103 E. Saturn Lane South Padre Island, TX 78597
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dinner with constituents
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 01/20/2015	Payee name Brownsville Chapter of Hadassah
	Amount (\$) \$20.00	Payee address; City; State; Zip Code 24 Coveway Drive Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation for sandwich plates fundraiser
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/28/2015	Payee name Brownsville Community Health Center
	Amount (\$) \$60.00	Payee address; City; State; Zip Code 191 East Price Road Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser - Casino Night
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/35 Rpt: 8/39	Euresti, Benjamin (The Honorable)	00019971
4	Date	Payee name	
L	01/05/2015	CVS Pharmacy	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$144.75	1484 Ruben M. Torres Boulevard	
		Brownsville, TX 78520	
8	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description	
	EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
		Gifts for st	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	05/14/2015	CVS Pharmacy #06777	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.96	3900 Oak Lawn Avenue	
		Dallas, TX 75219	
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Medication	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
		, <u> </u>	dicial Conference
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	04/02/2015	Castanon, Jose Alberto	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	32065 Ebony Road	
		San Benito, TX 78586	
F	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	l
	OF EXPENDITURE	Contributions/Donations Made By	avel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee	ustin, TX, officeholder living expense
		ivieuicai e	лропоса
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Candidate/Onlocational name Onloc sought	Office Hold
\vdash		· · · · · · · · · · · · · · · · · · ·	
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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
ONLINE (expenses to the lated obey)

	Candidate/Officeholder/Politica	Committee Legal Services 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: Sch: 5/35 Rpt: 9/39	2 FILER NAME Euresti, Benjamin (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019971
4	Date 05/17/2015	5 Payee name Chevron
6	Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 221 N. Main Street Euless, TX 76039
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gasoline (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dallas Judicial Conference
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/07/2015	Payee name Church of the Good Shepard
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 300 W. Morrison Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/11/2015	Payee name Church of the Good Shepard
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 300 W. Morrison Brownsville, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	cal Committee Legal Services 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:		
Sch: 6/35 Rpt: 10/39	Euresti, Benjamin (The Honorable) 00019	971
4 Date	5 Payee name	
06/21/2015	Church of the Good Shepard	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$50.00	300 W. Morrison	
	Brownsville, TX 78520	
a puppoer	August Au	· · · · · · · · · · · · · · · · · · ·
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	s. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officehold	
	Church donation	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Of	fice held
expenditure to benefit C/O	DH	
Date	Payee name	
05/16/2015	Chuy's Restaurant	
Amount (\$)	Payee address; City; State; Zip Code	
\$143.90		
Ф143.90	3501 Legend Lake	
	Waco, TX 76705	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Text Check if Austin, TX, officehold	
	Dallas Judicial Confere	
Complete ONLY if direct	Candidate/Officeholder name Office sought Of	fice held
expenditure to benefit C/O		100
Date	Payee name Courthouse Coffee Shop	
06/17/2015		
Amount (\$)	Payee address; City; State; Zip Code	
\$56.02	974 E. Harrison Street	
	Brownsville, TX 78520	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	•
DA ENDITORE	Check if Austin, TX, officehold	der living expense
	Breakfast for jurors	
		····
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice held
SAPERIGIDIE OF DEFICITE OF O		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - il Coi		Printing Exp Salaries/Wa		se s/Contract Labor	Travel Out of Dis OTHER (enter a	trict category not listed above)
			The Instruction Guide explains how t	to comple	ete t	his form.		•
1	Total pages Schedule F1:	2					Filer ID	(Ethics Commission Filers)
	Sch: 7/35 Rpt: 11/39		Euresti, Benjamin (The Honorable)				00019971	
4	Date	5	Payee name					
	05/13/2015		Cracker Barrel #266					
6	Amount (\$)	7	Payee address; City; State; 2	Zip Coc	le			
	\$39.22		1421 N. Beckley Avenue		٠			
			B. O. J. T.V. 75445					
			DeSoto, TX 75115					···
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	lule)	(b)	Description Check if travel outside	ia of Toyas Com	alata Sahadula T
	EXPENDITURE		Food/Beverage Expense			Check if Austin, TX,		
						Dallas Judicial C	onference	
9	Complete ONLY if direct		Candidate/Officeholder name Offi	ice soug	ht		Office he	eld
	expenditure to benefit C/OI	H						
	Date		Payee name					
	01/05/2015		Denny's Restaurant					
	Amount (\$)		Payee address; City; State;	Zip Cod	de			
	\$24.66		1875 N. Expressway					
			Brownsville, TX 78520					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	lule)	(b)	_ '	d/= 0	elección de la dela T
	EXPENDITURE		Food/Beverage Expense			Check if travel outsing Check if Austin, TX,		
						Lunch with cons	tituents	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	fice soug	ght		Office he	eld
	experialture to benefit C/O	' '						
	Date		Payee name					
	04/15/2015		Dollar Tree					
	Amount (\$)		Payee address; City; State;	Zip Cod	de			
	\$61.41		2400 Boca Chica Boulevard					
L			Brownsville, TX 78520					**************************************
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	lule)	(b)	Description Check if travel outsi	de of Toyon Com	plete Schodule T
	EXPENDITURE		Decorations			Check if Austin, TX,		
						Staff retirement	gathering	
	Complete ONLY if direct		Candidate/Officeholder name Off	fice souç	jht		Office he	eld
	expenditure to benefit C/O	ri —						
								*
ı								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)
	Sch: 8/35 Rpt: 12/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	04/04/2015	Easy To Go Tacos
6	Amount (\$) \$57.94	7 Payee address; City; State; Zip Code 32784 Highway 100 Los Fresnos, TX 78566
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Los Fresnos baseball team
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/17/2015	Enterprise Rent a Car
	Amount (\$) \$507.36	Payee address; City; State; Zip Code 7366 Cedar Springs Road
		Dallas, TX 75235
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rental car (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dallas Judicial Conference
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/24/2015	Payee name Escobedo, Albert
	Amount (\$) \$60.00	Payee address; City; State; Zip Code 308 Magnolia
		Los Fresnos, TX 78566
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Genesis Drum & Bugle Club
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
I		

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

	Candidate/Officeholder/Politica		mmittee l	JiivAwaius/Meirionais E ∟egal Services Th e Instruction Guid e	Salari	_	s/Contract Labor		OTHER (enter a	category not listed above)	
_				The manacaon Galax	copiums non to co	inpicio	ans form.	1_		/m.i	$\overline{}$
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers	9
	Sch: 9/35 Rpt: 13/39		Euresti, Ben	jamin (The Hond	orable)				00019971		
4	Date	5	Payee name					_			
	01/04/2015		Galaxy Rest	aurant							
<u> </u>		<u> </u>									
6	Amount (\$)	7	Payee addres	s; City;	State; Zip	Code					
	\$74.78		3451 Pablo	Kiesel Boulevard	d						
			Brownsville,	TY 78520							
		_				1					
8	PURPOSE	(a)) Category (Se	e Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	age Expense						iplete Schedule T.	
	Di Librone						l-m-d		, officeholder living	g expense	
						1	Dinner with A	ASS	istant D.A.		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office	sought			Office h	eld	
	expenditure to benefit C/OI	H									
⊨	Dete	Τ-			· · ·				· · · · · · · · · · · · · · · · · · ·		
	Date		Payee name								
	01/21/2015		Girl Scout Ti	roop #1067							
	Amount (\$)		Payee addres	s; City;	State; Zip	Code					
	\$48.00		15 Sunbeam	n Lane							
			Drownovillo	TV 70521							
L			Brownsville,	17 /0251							
	PURPOSE	(a)) Category (Se	e Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE			s/Donations Mad			<u></u>			nplete Schedule T.	
		l	Candidate/C	Officeholder/Polit	ical Committee			n, TX	, officeholder livin	g expense	
							Cookies				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sought			Office h	eid	
	expenditure to benefit C/OI	Н									
F	Date	Т	Payee name		·						
	01/03/2015		H.E.B.								
L											,,,,,
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$19.60		2155 Pared	es Line							
			Brownsille,	TX 78520							
L		Ļ.,	-			Las					
	PURPOSE OF	(a		e Categories listed at the	e top of this schedule)	(0)	Description				
	EXPENDITURE		Holiday gree	eting cards			<u> </u>		ide of Texas. Con , officeholder livin	nplete Schedule T.	
							II			g expense	
							Holiday mail	-บน	ເວ		
									**************************************		·····
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sought	i		Office h	eld	
	expenditure to benefit C/O	Н									
H											
1											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica	! Committee Legal Services 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 (Ethics Commission Filers)	\dashv
-	Sch: 10/35 Rpt: 14/39	Euresti, Benjamin (The Honorable) 00019971	
4	Date	5 Payee name	
	01/06/2015	H.E.B.	
6	Amount (\$)	7 Payee address; City; State; Zip Code 2155 Paredes Lane	
	\$72.39	2133 Faleues Laire	
		Brownsville, TX 78520	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Reception for constituents	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	H	
	Date	Payee name	
	04/15/2015	H.E.B.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$173.12	2250 Boca Chica Boulevard	
		Brownsville, TX 78520	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE.	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Staff retirement gathering	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
F	Date	Payee name	
	04/26/2015	H.E.B.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.45	2250 Boca Chica Boulevard	
		Brownsville, TX 78520	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austln, TX, officeholder living expense	
		Meal for constituents	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
\vdash			—

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

	Candidate/Officeholder/Political	Committee Legal Services 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 (Ethics Commission Filers)
_	Sch: 11/35 Rpt: 15/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	06/18/2015	H.E.B.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$194.64	2155 Paredes Line Road
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Decorations and gifts for staff luncheon
		Bootaliona and gine to take landing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/22/2015	H.E.B.
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$43.38	2155 Paredes Line Road
		Brownsville, TX 78520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeriolder/Political Confinitiee Gift basket for Los Fresnos Fire Department
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	06/23/2015	H.E.B.
	Amount (\$)	Payee address; City; State; Zip Code
1	\$45.99	2155 Paredes Line Road
		Brownsville, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EAFENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Gift basket for Los Fresnos EMS
_		
1	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District - Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
	otal pages Schedule F1:	
S	Sch: 12/35 Rpt: 16/39	Euresti, Benjamin (The Honorable) 00019971
4	Pate	5 Payee name
C	06/24/2015	H.E.B.
6 A	Amount (\$)	7 Payee address; City; State; Zip Code
•	\$84.97	2155 Paredes Line Road
	Ψ61.01	
		D
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Capplidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		One business of otherwise Separations
		Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Carladate, Chicaria and Tamb
	Date	Payee name
C	01/13/20 1 5	Hanna High School
-	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	2615 Price Road
		Brownsville, TX 78520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse. (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Choir Program
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
(02/02/2015	Hanna High School
_	Amount (\$)	Payee address; City; State; Zip Code
	\$90.00	2615 Price Road
		Brownsville, TX 78520
	DIIDDOSE	La.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Dance Team - Strutters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political		mmittee	Gill/Awards/Memorials Legal Services The Instruction Gui	·		vages/	/Contract Labor		OTHER (enter a	strict a category not listed a	bove)
Ļ		_			ao onpiamo no	to compi				Files ID	(Ethios Commis	cion Filore\
1	Total pages Schedule F1:	2							_	Filer ID	(Ethics Commis	aivii Lii c is)
L	Sch: 13/35 Rpt: 17/39			ijamin (The Hor	iorable)				L	00019971		
4	Date	5	Payee name									
	02/20/2015		Hanna High	School								
6	Amount (\$)	7	Payee addres	ss; City;	State:	; Zip Co	de		—			
	\$30.00		2615 Price F		•	•						
	450.00	ļ										
		ļ	Drowers dil-	TV 70500								
			Brownsville,					MATERIAL STATE OF THE STATE OF				
8	PURPOSE	(a)		e Categories listed at t		edule)	(b)	Description		g		
1	OF EXPENDITURE	ļ		s/Donations Ma		itto -	ļ	<u></u>			nplete Schedule T, a expense	
		ļ	candidate/C	Officeholder/Pol	ilical Comm	nuee	1	Spanish Club		officeholder living	⁸ ոսից <u>ո</u> յցը	
	į	1					1	Sparion Club	•			
Ļ	OLi O	<u> </u>	Samuelt to a trace		-	/tt:					old	
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	gnt			Office h	ela	
L	SAPERAGE TO DOTTOTIC OPOL								_			
<u> </u>	Date	_	Payee name									
1	03/24/2015		Hanna High	School								
T	Amount (\$)	 	Payee addres	ss; City;	State;	; Zip Co	ide					
	\$25.00		2615 Price I		·							
1	j		Brownsville,	TX 78520								
\vdash	Di IDEAAT	7 -					/L\	Description 1				
	PURPOSE OF	(a)		ee Categories listed at t		redule)	(a)	Description Check if travel	Ulase,	de of Teves Co-	nplete Schedule T.	
1	EXPENDITURE			ns/Donations Ma Officeholder/Pol		nittee		-		ide of Texas, Con , officeholder livin	-	
1	j		Çanuluate/(omocnoluel/P0.	intious COHIII	cc		Dance Team				
	į								_			
-	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name		Office sou	ht.		_	Office h	eld	
	expenditure to benefit C/O		uuuuuyUIII	IUIIIG	•		9116			J.1100 F		
<u> </u>												
	Date		Payee name	0-1								
	04/08/2015		Hanna High	School	*****							
ſ	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	ode				·	
	\$60.00		2615 Price	Road								
	,											
			Brownsville	TX 78520								
\vdash	PURPOSE	(a)			the service of the se	and it	(h)	Description				
1	OF	(a)		ee Categories listed at ns/Donations M		ieaule)	"		outsi	ide of Texas. Con	mplete Schedule T.	
1	EXPENDITURE			ns/Donations M Officeholder/Pol		nittee				, officeholder livin	-	
					CO IIIII			Dance Team				
 	Complete ONLY if direct	 '	Candidate/∩ffi	ceholder name	(Office sou	<u>t</u> ight			Office h	ıeld	
	expenditure to benefit C/OI		/OII:		`		J. 14			2,1130 11		
\vdash											 .	
1												

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Expense Travel in District
Expense Travel Out of District

SWages/Contract Labor OTHER (enter a cate)

	Candidate/Officeholder/Political	Committee Legal Services Salaries/rwages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 14/35 Rpt: 18/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	04/09/2015	Hanna High School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.00	2615 Price Road
L	bracking	Brownsville, TX 78520
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
1	ŀ	Baseball team
	ŀ	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
_	emportantial of the periodic C/O/	
_	Date	Payee name
	06/17/2015	Hernandez, Samuel
<u> </u>	Amount (\$)	Payee address; City; State; Zip Code
1	\$200.00	2105 Los Ebanos Road
Ī	İ	
	i	Brownsville, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
1	-	Candidate/Officeholder/Political Committee
	I	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
1	05/17/2015	Hilton Anatole
Τ	Amount (\$)	Payee address; City; State; Zip Code
1	\$607.31	2201 N. Stemmons Highway
		Dallas, TX 75207
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Hotel fees Check if travel outside of Texas. Complete Schedule T.
1	L. S. BERTON I UNE	Check if Austin, TX, officeholder living expense Dallas Judicial Conference
1		Dailas Sudicial Conference
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
<u></u>		
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SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Giff/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Political	al Committee Legal Services 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:		ers)
	Sch: 15/35 Rpt: 19/39	Euresti, Benjamin (The Honorable) 00019971	
4	Date	5 Payee name	
	05/28/2015	Impact Gold Fastpitch	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$36.00	907 N. Arroyo	
		Los Fresnos, TX 78566	
8	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Softball team	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	ит	
	Date	Payee name	
	03/12/2015	Little Caesar's Pizza	
	Amount (\$)	Payee address; City; State; Zip Code	
١	\$39.61	810 West Ocean Boulevard #A-3	
		Los Fresnos, TX 78566	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Law Club	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
l	expenditure to benefit C/Ol		
⊨	Date	Davido nomo	
	Date 06/25/2015	Payee name Little Caesar's Pizza	
L			
	Amount (\$) \$27.11	Payee address; City; State; Zip Code 810 West Ocean Boulevard #A-3	
	⊅ ∠1,11	OTO MACOL OCCUL DOGICANT WAS	
		Los Frances TV 79566	
<u> </u>		Los Fresnos, TX 78566	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Lunch for Los Fresnos High School student	
		volunteers	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH Control of the con	
H			

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

	Candidate/Officeholder/Politica		Legal Services The Instruction Guide e	Salaries/V	Vages.	/Contract Labor		OTHER (enter a	a category not listed at	iove)
1	Total pages Schedule F1:	2 FILER NAM	=				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 16/35 Rpt: 20/39	Euresti, Be	njamin (The Honora	able)				00019971		
4	Date	5 Payee name					_			
	01/15/2015		eros Restaurant							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					· · · · · · · · · · · · · · · · · · ·
İ	\$66.50	2500 N. Ex								
		Brownsville	e, TX 78520							
8	PURPOSE	(a) Category 15	ee Categories listed at the to	n of this schedule)	(b)	Description				
	OF EXPENDITURE	· ·	rage Expense	,		Check if travel			nplete Schedule T.	
	EXPENDITURE							, officeholder livin	g expense	
						Dinner with c	on:	stituents		
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ıght			Office h	ela	
		1								
	Date	Payee name								
	05/22/2015	<u> </u>	eros Restaurant							
	Amount (\$)	Payee addre	• •	State; Zip Co	ode					
	\$133.31	2500 N. Ex	pressway							
L		Brownsville	e, TX 78520							
	PURPOSE OF		See Categories listed at the to	p of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense			=		de of Texas. Cor , officeholder livin	nplete Schedule T. a expense	
		1							chool District se	enior
						athletes				
Г	Complete ONLY if direct		ficeholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/O	Н								
	Date	Payee name)							
	01/28/2015	Los Fresno	s High School							
Г	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$42.00	907 N. Arro	oyo Boulevard							
		Los Fresno	s, TX 78566							
H	PURPOSE	(a) Category	See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Contributio	ns/Donations Made	: Ву					mplete Schedule T.	
	EXI ENDITORE	Candidate/	Officeholder/Politic	al Committee		Check if Austin		(, officeholder livir	ig expense	
						SURDAII (CAII)	ı			
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	laht			Office h	neld	
	expenditure to benefit C/O		ncentiue: name	Office 800	սցու			Onice i	icid	
\vdash										
ı										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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 comple	te ti	nls form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 17/35 Rpt: 21/39		Euresti, Benjamin (The Honorable)		00019971
4	Date	5	Payee name		
	05/09/2015		Los Fresnos High School Cheerleaders		
6	Amount (\$)	7	Payee address; City; State; Zip Cod	le	
	\$30.00		907 N. Arroyo Boulevard		
			Los Fresnos, TX 78566		
8	PURPOSE	(a)	S 13 (Bob dategories notes at the top of the	(b)	Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Advertisement in Program Book
9	Complete ONLY if direct	L	Candidate/Officeholder name Office soug	 iht	Office held
ľ	expenditure to benefit C/OI			,	5
H	Date		Payee name		
	05/20/2015		Los Fresnos High School Cheerleaders		
_	Amount (\$)		Payee address; City; State; Zip Coo	de.	
	\$50,00		907 N. Arroyo Boulevard		
	Ψ50.50				
			Los Fresnos, TX 78566		
	PURPOSE OF	(a)	3 , (=== ===============================	(b)	Description
	EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			·		Advertisement in Program Book
					- -
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office soug	ght	Office held
L		_			
	Date		Payee name		
L	05/21/2015	L	Los Fresnos High School Senior Class		
	Amount (\$)		Payee address; City; State; Zip Coo	de	
	\$50.00		907 N. Arroyo Boulevard		
			Los Fresnos, TX 78566		
	PURPOSE	(a		(b)	Description
	OF EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Candidate/Officeholder/Political Committee		Fundraiser
H	Complete ONLY if direct	1	L Candidate/Officeholder name Office soug	riht	Office held
	expenditure to benefit C/O		Carlanda Officionologic Flattic	J. 11	255 11014
_			Market		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Fi	lers)			
	Sch: 18/35 Rpt: 22/39	Euresti, Benjamin (The Honorable) 00019971				
4	Date	5 Payee name				
	04/25/2015	Martinez, Genaro				
6	Amount (\$) \$40.00	7 Payee address; City; State; Zip Code 444 Land O' Lakes				
		Brownsville, TX 78520				
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense City basketball team				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	06/24/2015	McDonald's				
	Amount (\$) \$27.96	Payee address; City; State; Zip Code 115 E. Ocean Drive				
		Los Fresnos, TX 78566				
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch for Los Fresnos High School student volunteers				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH				
	Date	Payee name	_			
	01/08/2015	Milano's Restaurant				
	Amount (\$) \$64.09	Payee address; City; State; Zip Code 2900 W. Pike Boulevard				
		Weslaco, TX 78596				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Ilving expense Hidalgo County meeting with District Judges				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH				

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

	Candidate/Officeholder/Politica	Committee	Legal Services The Instruction Guide expla			/Contract Labor n is form.		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	-
	Sch: 19/35 Rpt: 23/39		enjamin (The Honorable)			,	00019971		_
4	Date	5 Payee name	9							
	01/11/2015	Our Lady \$	Star of the Sea							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Co	de					
	\$100.00	705 S. Lor	ngoria Street							
İ										
		Port Isabe	I, TX 78578							
8	PURPOSE	(a) Category (See Categories listed at the top of t	his schedule)	(b)	Description				
	OF EXPENDITURE		ons/Donations Made By			므		de of Texas. Com		
		Candidate	/Officeholder/Political C	ommittee		Church donat		officeholder living	expense	
						Church dona	liUi	1		
L										_
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ight			Office he	eld	
L										
	Date	Payee nam								
	05/15/2015	Outback S	teakhouse							
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode					
	\$49.91	3510 W. A	Airport Freeway							
		Irving, TX	75062							
	PURPOSE OF		See Categories listed at the top of	this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	erage Expense			<u></u>		ide of Texas. Com		
						Dallas Judicia		, officeholder living Conference	, expense	
İ						Danas saaren	.	Jointrande		
┝	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	l ight			Office he	eld	-
	expenditure to benefit C/OI	1			_					
F	Date	Payee nam	e				_			=
	04/23/2015	Oyster Ba								
-	Amount (\$)	Payee addr		State; Zip Co	nde			.	<u> </u>	_
	\$77.30	_	evee Street	J. J. J. J. J. J. J. J. J. J. J. J. J. J						
	Ψ17.00	2007 2. 2.	3100 34001							
		Brownsvill	e, TX 78520							
Г	PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE		erage Expense	•		Check if travel		ide of Texas. Com		
	EAFENDHURE		-					, officeholder living		
						Staff luncheo	n -	Administrati	ion Day	
L		L			Ļ					_
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ıght			Office he	eld	
L	experience to beliefit G/O	•								
1										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	al Committee Legal Services 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:	·
	Sch: 20/35 Rpt: 24/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	05/10/2015	Oyster Bar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.73	153 Paredes Line Road
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Mother's Day luncheon with constituents
	Complete ONLY if disent	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
	Data	
	Date 05/19/2015	Payee name Oyster Bar
_		-
	Amount (\$) \$72.25	Payee address; City; State; Zip Code
ŀ	\$72.25	153 Paredes Line Road
		B. W. TV 70500
		Brownsville, TX 78520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hanna High School top 5% students
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H · ·
	Date	Payee name
	06/20/2015	Pena, Christopher
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1900 Coffee Port Road
		Brownsville, TX 78520
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Wedding gift
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorare to benefit G/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

Travel Out of District

	Candidate/Oniceriolder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 21/35 Rpt: 25/39	Euresti, Benjamin (The Honorable) 00019971
4	02/14/2015	5 Payee name Pena, Lupe
_		
b	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1961 Westminster
	\$100.00	1901 Westillister
		December 1977 TOPO
	W	Brownsville, TX 78520
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Ciff/Awards/Mamorials Expanse
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wedding gift
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/02/2015	Peter Piper Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.90	1644 Central Boulevard
		Brownsville, TX 78520
	PURPOSE	and the state of t
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Hanna High School scholarship recipients
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit cro	
	Date	Payee name
	06/02/2015	Peter Piper Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.20	1644 Central Boulevard
		Brownsville, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hanna High School scholarship recipients
		Traina Figh School scholatship rediperts
<u> </u>	Complete ONLY if discret	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
L	·	
l l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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)									
	Sch: 22/35 Rpt: 26/39	Euresti, Benjamin (The Honorable)	00019971									
4	Date	5 Payee name	Land American Control of Control									
	02/15/2015	Primera Iglesia Presbiteriana										
6	Amount (\$)	7 Payee address; City; State; Zip Code										
•	\$100.00	616 E. Jefferson										
	*=====											
		Brownsville, TX 78520										
_	DUDDOOF.											
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions / Departies of Mode Pty	el outside of Texas. Complete Schedule T.									
	EXPENDITURE		in, TX, officeholder living expense									
		Church don	ation									
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held									
	expenditure to benefit C/O	1										
	Date	Payee name										
	02/22/2015	Primera Iglesia Presbiteriana										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$50.00	616 E. Jefferson										
	Ψ50.00	010 E. 0011010011										
		Brownsville, TX 78520										
_			A STATE OF THE STA									
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Check if trave	el outside of Texas. Complete Schedule T.									
l	EXPENDITURE	Contributions/Donations Made by	tin, TX, officeholder living expense									
		Church don	ation									
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held									
	expenditure to benefit C/O	1										
H	Date	Payee name										
İ	03/22/2015	Primera Iglesia Presbiteriana										
H	Amount (\$)	Payee address; City; State; Zip Code										
	\$100.00	616 E. Jefferson										
	Ψ±00,00	old E. Gilloldon										
1		Brownsville, TX 78520										
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description	el outside of Texas. Complete Schedule T.									
	EXPENDITURE	Continuations/Donations water by	tin, TX, officeholder living expense									
		Church don										
l	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held									
	expenditure to benefit C/O											
\vdash			And the second and th									

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica			Gift/Awa Legal Se	rds/Memorials Exp rvices	pense	Printing E Salaries/V	xpens Vages	e /Contract Labor		Travel Out o OTHER (ent		not listed above)
				The Ins	struction Guide	explains ho	w to comp	lete t	nis form.	_			
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethic	s Commission Filers)
	Sch: 23/35 Rpt: 27/39		Euresti, Ben	jamin	(The Honor	able)					0001997	1	
4	Date	5	Payee name										
	04/05/2015		Primera Igle	sia Pr	esbiteriana								
6	Amount (\$)	7	Payee addres	ss;	City;	State	; Zip Co	ode					
	\$100.00		616 E. Jeffe	rson									
			Brownsville,	TX 7	8520								
8	PURPOSE	(a)	Category (Se	e Categ	ories listed at the t	op of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Contribution						Check if travel				
	_ ,, _,,_,,_		Candidate/C	Officer	iolder/Politic	al Comm	nittee		Church dona			ving expense	3
									Charch dona	ıuoı			
9	Complete ONLY if direct	Ц	Candidate/Offic	cohold	er name		Office sou	l sabt			Office	held	
9	expenditure to benefit C/OI		Candidate/Oni	centitio	ei iiaiiie	,	Jilice soc	gni			Onice	HGIG	
	Date		Payee name										
	04/12/2015		Primera Igle	sia Pi	resbiteriana								
	Amount (\$)	 	Payee addres	ss;	City;	State	; Zip Co	ode					
	\$100.00		616 E. Jeffe	rson							'		
			Brownsville	, TX 7	8520								
-	PURPOSE	(a	Category (Se	ee Cated	ories listed at the	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE				nations Mad		,		Check if travel				
	EXPENDITORE		Candidate/0	Officel	nolder/Politic	cal Comn	nittee		Check if Austin			iving expens	е
									Church dona	lliOi	11		
							0.00				0.55	- 3 1-d	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	cehold	er name	(Office so	ught			Office	e held	
	Date		Payee name										
	05/24/2015		Primera Igle	esia P	resbiteriana								
	Amount (\$)		Payee addre	ss;	City;	State	; Zip C	ode					
	\$100.00		616 E. Jeffe	erson									
			Brownsville	, TX 7	8520								
	PURPOSE	(a	Category (S	ee Categ	ories listed at the	top of this scl	hedule)	(b)	Description		•		
	OF EXPENDITURE				nations Mad		•••		Check if travel				
			Candidate/0	Office	nolder/Politic	cal Comn	nittee		Church dona			iving expens	e
									Charen done	1110	••		
L	Complete ONII V if direct	<u> </u>	Candidate/Offi	cahola	ler name		Office so	laht			Offic	e held	
	Complete ONLY if direct expenditure to benefit C/O		Carruiuate/UIII	CEHOIO	ici iidiiid		OHIGE 201	agiil			Onic	C HGIU	
_													
ŀ													

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

	Contributions/ Donations Made By Candidate/Officeholder/Political	Committee Legal Services 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 (Ethics Commission Filers)
	Sch: 24/35 Rpt: 28/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	06/07/2015	Primera Iglesia Presbiteriana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	616 E. Jefferson
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITION	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Church donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1
	Date	Payee name
	06/21/2015	Primera Iglesia Presbiteriana
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	616 E, Jefferson
	400.00	
		Brownsville, TX 78520
	DUDDOSE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check If Austin, TX, officeholder living expense
		Church donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/13/2015	Quizno's
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.68	3002 Heritage Way
	φ±0.00	
		Havingan TV 70550
		Harlingen, TX 78550
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Dallas Judicial Conference
		Daniel Gallotti Gallo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense

Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1: Sch: 25/35 Rpt: 29/39		E njamin (The Honorable	e)			3	Filer ID 00019971	(Ethics Commission File	ers)	
4	Date 05/17/2015	5 Payee name		<u> </u>							
6	Amount (\$) \$33.66	7 Payee addre 2111 W. M Dallas, TX	ockingbird Lane	State; Zip Co	de						
8	PURPOSE OF EXPENDITURE	(a) Category (s Gasoline	See Categories listed at the top of	this schedule)	(b)		, TX	ide of Texas. Comp , officeholder living Conference			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ght			Office he	eld		
	Date 05/16/2015	Payee name Republic P	arking Airport								
	Amount (\$) \$35.00	Payee addre 3030 Rebe Harlingen,	l Drive	State; Zip Co	de						
	PURPOSE OF EXPENDITURE	(a) Category (s Parking lot	See Categories listed at the top of fees	this schedule)	(b)	<u> </u>	, TX	ide of Texas. Com , officeholder living Conference			
	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office sou	ght			Office he	eld		
	Date 06/18/2015	Payee name Rico Rollo								_	
	Amount (\$) \$40.00		ess; City; ral Boulevard e, TX 78520	State; Zip Co	ide						
	PURPOSE OF EXPENDITURE		Gee Categories listed at the top of Frage Expense	this schedule)	(b)	ш	, TX	ide of Texas. Com , officeholder living			
_	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office he	əld		

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	-	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhe Polling Expen Printing Expe Salaries/Wag	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 File	ers)		
	Sch: 26/35 Rpt: 30/39	Euresti, Ber	jamin (The Honorable)			00019971			
4	Date	5 Payee name							
	04/15/2015	Sam's Club							
6	Amount (\$)	7 Payee addres	s; City; Star	te; Zip Cođe					
	\$221.00	•	Alton Gloor Road						
							ľ		
		Brownsville,	TX 78520		ı				
8	PURPOSE OF		e Categories listed at the top of this s	chedule) (b	Description	autida af Taura Canadata Cabadula Y			
	EXPENDITURE	Gift/Awards	Memorials Expense			outside of Texas. Complete Schedule T. n, TX, officeholder living expense			
					Staff retireme	ent gathering			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offi	ceholder name	Office sough	t	Office held			
	Date	Pavee name			111 1 1 1				
	04/18/2015	Sam's Club							
	Amount (\$)	Payee addres	ss; City; Sta	te; Zip Code					
	\$32.98	=	Alton Gloor Road	,					
		Brownsville	TX 78520						
	PURPOSE OF		e Categories listed at the top of this s	schedule) (b		outside of Toyon, Convolete Cabadyla T			
	EXPENDITURE	Food/Bever	age Expense		<u></u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense			
					Staff retireme	ent gathering			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offi	ceholder name	Office sough	t	Office held			
	experiorate to benefit eror	<u> </u>							
	Date	Payee name							
	04/18/2015	Sam's Club							
	Amount (\$)	Payee addre	*	te; Zip Code	;				
	\$21.98	3570 West	Alton Gloor Road						
		Brownsville	TX 78520						
	PURPOSE	(a) Category (Se	ee Categories listed at the top of this	schedule) (b) Description				
	OF EXPENDITURE	Food/Bever	age Expense		Personal Control Contr	outside of Texas. Complete Schedule T.			
					_	n, TX, officeholder living expense ent gathering			
						g g			
-	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sough	t	Office held			
	expenditure to benefit C/OI					- · · · - · · · · · ·			
					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica			ng Expe ies/Wa	pense Travel Out of District /ages/Contract Labor OTHER (enter a category not listed above)
			The Instruction Guide explains how to co	mplet	
1	Total pages Schedule F1:	2			3 Filer ID (Ethics Commission Filers)
	Sch: 27/35 Rpt: 31/39		Euresti, Benjamin (The Honorable)		00019971
4	Date	5	Payee name		
L	05/15/2015		Southwest Airlines		
6	Amount (\$)	7	Payee address; City; State; Zip	Cod	de
	\$25.00		P.O. Box 36647-1CR		
L			Dallas, TX 75235		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	((b) Description
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		l			Extra luggage charge for Dallas Judicial Conference
					,55 5
9	Complete ONLY if direct		Candidate/Officeholder name Office	sougl	ght Office held
	expenditure to benefit C/OI	H		_	
	Date		Payee name		
	05/17/2015		Southwest Airlines		
	Amount (\$)		Payee address; City; State; Zip	Cod	de
	\$336.49		P.O. Box 36647-1CR		
			Dallas, TX 75235		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	((b) Description
	OF EXPENDITURE		Flight fee		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Dallas Judicial Conference
\vdash	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office	soug	ght Office held
	expenditure to benefit C/O			,	-
F	Date	Ī	Payee name		
	02/26/2015		St. Joseph Academy		
H	Amount (\$)	-	Payee address; City; State; Zip	Cod	de
	\$100.00		101 St. Joseph Drive		
			•		
			Brownsville, TX 78520		
\vdash	PURPOSE	(a`	Category (See Categories listed at the top of this schedule)	1	(b) Description
	OF	[``	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		<u>.</u>		Check if Austin, TX, officeholder living expense
					Style Show
L	Complete ON!! V is direct	<u> </u>	Candidata (Officeholder name	50::5	Office held
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	soug	ght Office held
L					
ĺ					

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political		nmittee	Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						avel Out of Dis THER (enter a	strict category not listed above)	
_	Total C. L. L. L T	_			Sapiania no:	vonipi	 (l]2 ┌	ler ID	(Ethics Commission F	ilere\
1	Total pages Schedule F1:	2			orable)				1	ier iD 0019971	(Euros OurillioSiOff P	nusa)
	Sch: 28/35 Rpt: 32/39			njamin (The Hon	e)							
4		5	Payee name									
	05/31/2015	_	Texas A&M	University King	sville		_					
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$35.00		700 Univers	sity Boulevard								
	1		Kingsville, T	X 78363								
8	PURPOSE	(a)		ee Categories listed at ti	he ton of this cal-	edule)	(b)	Description				
_	OF	,-,)		ee Categories listed at t ns/Donations Ma)			outside	of Texas. Com	plete Schedule T.	
	EXPENDITURE			Officeholder/Poli		ittee		Check if Austin	ı, TX, off	iceholder living) expense	
								Fundraiser				
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office he	eld 	
	expenditure to benefit C/OF	1							_			
	Date		Payee name									
	01/26/2015		-	er for the Judicia	ary							
\vdash	Amount (\$)	-	Payee addre	ss; City;	State:	; Zip Co	de					
	\$60.00		•	Intonio Street		•						
ĺ			Suite 800									
ĺ	l		Austin, TX	78701								
_		<u></u>					<i>(</i> L)	D===2-2				
ĺ	PURPOSE OF	(a)		ee Categories listed at t	the top of this sch	nedule)	(u)	Description Check if travel	obiatuo	of Texas Com	iplete Schedule T.	
	EXPENDITURE		Fees					Check if Austin			•	
	i							<u> </u>			cial Conference	
	j											
Н	Complete ONLY if direct		Candidate/Offi	iceholder name		Office sou	ght			Office h	eld	
1	expenditure to benefit C/O	Н										
F	Date	Γ	Payee name		<u></u>		_				,	
	05/14/2015			ter for the Judici	ary							
\vdash	Amount (\$)	 	Pavee addre			; Zip Co)de					
	Amount (\$) \$50.00	1	,	Antonio Street	Siale	, _,p \(\mathcal{L}\)	Juli					
	υυ.υσφ											
	:		Suite 800	70704								
L		_	Austin, TX	/8/U1 ————								
اً ا	PURPOSE	(a)		ee Categories listed at i		nedule)	(b)	Description	المعاجبة المسا	of Table	soloto Cabadada	
İ	OF EXPENDITURE			ns/Donations Ma		nittoo				of Texas. Con ficeholder livin	nplete Schedule T. a expense	
ĺ			Candidate/	Officeholder/Pol	ntical Comn	untee		Judicial shirt		IVILI	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
								- startering within	•			
_	Complete ONLY if direct	Щ	Candidate/Off	iceholder name		Office sou	laht			Office h	eld	
	expenditure to benefit C/O		Januare/Uli	.seneraei naine	,	J.1100 30L	~⊎ııt			Janua II		
L	w											
ĺ												

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	Fees Food/Beverage Expense Gift/Awards/Memorials Expense ommittee Legal Services	Polling Exp Printing Ex	pense xpens		Travel in Distric Travel Out of D	
		The Instruction Guide explains I	now to compl	lete ti	his form.		
1	Total pages Schedule F1:	FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 29/35 Rpt: 33/39	Euresti, Benjamin (The Honorable)				00019971	
4	Date	Payee name					
	05/14/2015	Texas Center for the Judiciary					
6	Amount (\$)	Payee address; City; Stat	e; Zip Co	de			
	\$14.00	1210 San Antonio Street					
		Suite 800					
		Austin, TX 78701					
8	PURPOSE	a) Category (See Categories listed at the top of this s	abadula)	(b)	Description		
•	OF	Contributions/Donations Made By	cnedule)	(-)	_ `	outside of Texas. Cor	mplete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Com	mittee		₩	, TX, officeholder livir	ng expense
					Judicial cups		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sou	ight		Office h	neld
	Date	Payee name					
	06/19/2015	Texas Center for the Judiciary					
	Amount (\$)	Payee address; City; Stat	e; Zip Co	de			
	\$250.00	1210 San Antonio Street					
		Suite 800					
		Austin, TX 78701					
	PURPOSE	A) Category (See Categories listed at the top of this s	chedule}	(b)	Description		
	OF EXPENDITURE	Fees	,			outside of Texas. Co	·
	EXI ENDITORIE				_	, TX, officeholder livir	ng expense mber 27-30, 2015,
						erence in Dall	
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ught		Office h	neld
	expenditure to benefit C/Oł	Candidate/Officerolaci Ficanc	011100 000	giii		O III OC I	ioid
	Data	D				· · · · · · · · · · · · · · · · · · ·	
	01/15/2015	Payee name Texas Democratic Party					
		<u> </u>	te; Zip Co				
	Amount (\$)	Payee address; City; Sta 707 Rio Grande St.	ie; zip Co	oue			
	\$10.00	707 Rio Grande St.					
		Austin, TX 78701					
	PURPOSE	a) Category (See Categories listed at the top of this s	chedule)	(b)	Description		
	OF EXPENDITURE	Contributions/Donations Made By			1	outside of Texas. Co	
		Candidate/Officeholder/Political Com	mittee			i, TX, officeholder livi Party donation	
					Democratic F	arty donation	
\vdash	Complete ONLY if direct	Candidate/Officeholder name	Office sou	l Jaht		Office I	neld
	expenditure to benefit C/O	Canadago, Chiconoldor name	Omou Sou	4911L		Omoc i	1014
_			 				

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
Travel Out of District
Travel Out of District

	Candidate/Officeholder/Politica	I Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/35 Rpt: 34/39	Euresti, Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	02/17/2015	Texas Democratic Party	
6	Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 707 Rio Grande St. Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made by	outside of Texas. Complete Schedule T. TX, officeholder living expense arty donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Γ	Date	Payee name	
	03/15/2015	Texas Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	707 Rio Grande St.	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel of	outside of Texas. Complete Schedule T.
	EXPENDITURE	Continuations/Donations Made by	TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	04/16/2015	Texas Democratic Party	
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 707 Rio Grande St.	
		Austin, TX 78701	
	PURPOSE OF EXPENDITURE	Continuations/Donations Made by	outside of Texas. Complete Schedule T. , TX, officeholder living expense Party donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		nmittee	Gift/Award Legal Serv				Expens Wages	ie /Contract Labor		Travel in Distric Travel Out of D OTHER (enter		eđ above)
1	Total pages Schedule F1:	2	FILER NAME	:		-				3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 31/35 Rpt: 35/39		Euresti, Ben		The Hono	rable)				ı	00019971	`	
4	Date	5	Payee name										
	05/15/2015	•	Texas Demo	ocratic	Party		_			_			
6	Amount (\$)	7	Payee addres	ss; (City;	State;	Zip C	ode		_			
	\$10.00	•	707 Rio Gra	ınde St.									
			Austin, TX 7	⁷ 8701						_			
8	PURPOSE	(a)	Category (Se	e Categori	ies listed at the	top of this sche	edule)	(b)	Description	_			_
	OF EXPENDITURE		Contribution	ns/Dona	ations Mad	de By			 			mplete Schedule T	
			Candidate/C	Jiliceho	naer/Politi	cal Comm	ıttee		Democratic P		, officeholder livir tv donation	ig expense	
									_ Joorado F	ωι	., aonai011		
9	Complete ONLY if direct	<u></u>	Candidate/Offic	ceholder	r name		Office so	<u>L</u> uaht		—	Office h	 neld	
	expenditure to benefit C/OF	_	,,					- g-IL			3.11001		
	Date		Payee name										
L	06/15/2015		Texas Dem		Party ———								_
	Amount (\$)		Payee addres		City;	State;	Zip C	ode		_			
	\$10.00		707 Rio Gra	ande St									
		L	Austin, TX 7	78701						_			
	PURPOSE	1	Category (Se				edule)	(b)	Description				
	OF EXPENDITURE		Contribution				ittoo		-		ide of Texas. Co , officeholder livi	mplete Schedule T na expense	
			Candidate/C	энсе п с	Juei/Politi	icai Comm	nu ce	Ī	Democratic F				
										"			
	Complete ONLY if direct		Candidate/Offi	ceholde	r name	C	Office so	ught			Office I	neld	
	expenditure to benefit C/OF	Н								_	_		
F	Date		Payee name							_			
ĺ	04/27/2015		Tip o Texas		√liss Kickb	all							
	Amount (\$)	\vdash	Payee addres	ss; (City;	State;	Zip C	ode		_			
	\$100.00	1	24 W. Los E	•	•	,	•						
	į												
			Brownsville	, TX 78	520		_			_			
	PURPOSE	(a)	Category (Se	ee Categor	ries listed at the	e top of this sch	edule)	(b)	Description	_			
	OF EXPENDITURE		Contribution	ns/Dona	ations Mad	de By						mplete Schedule T	,
			Candidate/0	∪fficeh	olaer/Polit	icai Comm	ııttee		Check if Austin		k, officeholder livi a Vianne Vi		
									Domanon (Ol	**116	L. VIMINIG V.		
_	Complete ONLY if direct		Candidate/Offi	ceholde	r name		Office sc	<u>l</u> Juaht			Office i	held	. "
	expenditure to benefit C/Oh		141144457011.	.ssnoiut	ion i No		30	~Aiir			Jilloo		
\vdash	<u> </u>								<u> </u>				
l													

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees
Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

l	Candidate/Officeholder/Politica		mmittee Legal Services	Salaries/V		e 'Contract Labor		OTHER (enter a	category not listed above)
			The Instruction Guide explains	how to comp	ete ti	nls form.			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
l	Sch: 32/35 Rpt: 36/39		Euresti, Benjamin (The Honorable)					00019971	
4	Date	5	Payee name						
	06/29/2015		Top Rank Boxing						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	de				
	\$387.94		748 Pilot Road	, ,					
	·								
			Las Vegas, NV 89119						
8	PURPOSE	(0)		1	(b)	Description			
ľ	OF	(a)	Category (See Categories listed at the top of this Advertising Expense	schedule)	(1)	Description Check if travel (outsi	de of Texas. Com	plete Schedule T.
l	EXPENDITURE		Advertising Expense			-		officeholder living	•
						Recognition of	of C	ffice Holder	•
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	H							
_	Date	-	Payee name						
	03/22/2015		Valley International Country Club						
┝	Amount (\$)			ate; Zip Co	ıde				· · · · · ·
	\$60.80		95 Country Club Road	a.o,p oc					
	400.00		Jo Journay Glas Moas						
			Provincyillo TV 79520						
Brownsville, TX 78520									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(a)	Description	outci	da of Toyac Cam	plete Schedule T.
	EXPENDITURE		Food/Beverage Expense			<u> </u>		officeholder living	•
						Lunch with co			,
H	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	Н							
F	Date	Τ	Payee name						
	06/03/2015		Valley International Country Club						
┝	Amount (\$)	\vdash	· · · · · · · · · · · · · · · · · · ·	ate; Zip Co	ode				
	\$59.05		95 Country Club Road						
	,,,,,,		,						
l			Brownsville, TX 78520						
┝	DUDDOCE	(0)			/h)	D			
	PURPOSE OF	(a	Category (See Categories listed at the top of this	s schedule)	(D)	Description Check if travel	outsi	de of Texas, Com	plete Schedule T.
	EXPENDITURE		Food/Beverage Expense					officeholder living	•
						Staff luncheo			
H	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	Н							
H	*								
1									

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gift/Americal Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political			
		The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 33/35 Rpt: 37/39	Euresti, Benjamin (The Honorable) 00019971		
4	Date	5 Payee name		
	06/18/2015	Valley International Country Club		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$141.81	95 Country Club Road		
		Brownsville, TX 78520		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Staff luncheon		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OF	.		
	Date	Payee name		
	06/21/2015	Valley International Country Club		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$159.78	95 Country Club Road		
		Brownsville, TX 78520		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Father's Day function		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH				
Г	Date	Payee name		
	06/06/2015	Vega, Rosa		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$100.00	725 Havana		
		Brownsville, TX 78520		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Gift/Awards/Memorials Expense		
		Check if Austin, TX, afficeholder living expense Wedding gift		
		vvedding girt		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
\vdash				

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

	Candidate/Officeholder/Politica	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not ilsted above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		
_	Sch: 34/35 Rpt: 38/39	Euresti, Benjamin (The Honorable)	
	·		
4	Date	5 Payee name	
	04/14/2015	Vermillion	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$86.35	115 Paredes Line Road	
		Brownsville, TX 78520	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORIC	Check if Austin, TX, officeholder living expense	
		Hanna Dance Team	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/12/2015	Vermillion	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$44.04	115 Paredes Line Road	
		Brownsville, TX 78520	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Staff luncheon	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
expenditure to pencilit 0/011			
	Date	Payee name	
	05/06/2015	Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$96.48	1004 W. Ocean Boulevard	
		Los Fresnos, TX 78566	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By Check If travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Arts and crafts materials for Los Fresnos High	
		School	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	l Committee Legal Services 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:	
	Sch: 35/35 Rpt: 39/39	Euresti, Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	06/20/2015	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
٠	\$81.80	1004 W. Ocean Boulevard
	Φ01.00	1004 VV. Ocean Bodievald
		Los Fresnos, TX 78566
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
ĺ		Supplies for elementary summer school
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/15/2015	Whataburger
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.39	950 N. Loop 340
		Waco, TX 76705
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austln, TX, officeholder living expense
		Dallas Judicial Conference
Т	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-i
H	Doto	
	Date	Payee name
L	03/14/2015	Wing Stop
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.42	2501 Paredes Line Road
		Brownsville, TX 78520
\vdash	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Hanna basebali team
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
L		
<u> </u>	rmo provided by Toyon E	thios Commission Wash at high state by us