Mr. Roel Cavazos

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instructi	on Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDE NAME	1 1/ 1	Mi	OFFICE USE ONLY
IVANIC	NICKNAME LAST	SUFFIX	Date Received
4 CANDIDATE/ OFFICEHOLDEI MAILING ADDRESS		Benito TX 78586	DEPARTMENT OF ELECTIONS & VOTER REGISTRATION
Change of Addres	s		3. on
5 CANDIDATE/ OFFICEHOLDEI PHONE	AREA CODE PHONE NUMBER (956) 559-6593	EXTENSION	Date Hand-delivered or Date Posimerion
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Rolando	M1	Receipt # Amount \$ Date Processed
,	NICKNAME LAST COVOZOS	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Busines	street address (no po box please); apt/su 124 Chapman St. Sa	on Benito TX 78	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (956) 564-3173	EXTENSION	
9 REPORT TYPE	January 15 30th day before elect		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year O1 / 22 / 16	THROUGH 02/	20 / 16
11 ELECTION	Month Day Year Primary O3 /O i / I General	ELECTION TYPE Runoff Other Description Special	
2 OFFICE	Cameron County Const Pat-3.	13 OFFICE SOUGHT (If known)	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME RO	el Cau	9205	5 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	16 NOTICE FROM POLITICAL 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		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		·
-	<u> </u>	COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	·
Additional Pages			•
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
			······································
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	N \$ - 0 -
	777	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS,	\$ 111.58
-	4. TOTAL	POLITICAL EXPENDITURES	\$1,024.26
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$		
18 AFFIDAVIT			
CONTROL OF THE PARTY OF THE PAR	JOSE ALFREDO ZAM Notary Public STATE OF TEXA My Comm. Exp. February	true and correct and includes all info under Title 15, Election Code.	erjury, that the accompanying report is mation required to be reported by me allowed by the state of Officeholder
AFFIX NOTARY STAME			-
Sworn to and subscr	ibed before me, b	y the said Roel Cavazos	, this the
day of fehrow	7,20 <u>/6</u> ,1	to certify which, witness my hand and seal of office.	
	4440	- Notory Public	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILERNAME ROEL COVOZOS 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ - O - 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ - O - 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ - O - 4. SCHEDULE E: LOANS \$ - O - 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ - O - 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ - O - 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ - O - 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ - O - 9. SCHEDULE F4: EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. The schedule BY PAYMENT MADE FROM PERSONAL FUNDS \$ 1,024. The schedule BY PAYMENT MADE FROM PERSONAL FUNDS \$ 1,024. The schedule BY PAYMENT MADE FROM POLITICAL CONTRIBUTIONS \$ - O - 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS \$ - O - 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ - O - 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ - O -			
NAME OF SCHEDULE 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3. SCHEDULE B: PLEDGED CONTRIBUTIONS 4. SCHEDULE E: LOANS 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS 8. O- 9. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 10. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS 11. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	19 FI		mmission Filers)
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ - 0 - 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ - 0 - 4. SCHEDULE E: LOANS \$ - 0 - 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ - 0 - 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ - 0 - 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ - 0 - 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. ZU 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ - 0 - 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS			
3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ -0 - 4. SCHEDULE E: LOANS \$ -0 - 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ -0 - 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ -0 - 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. 26 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ -0 - 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ -0-
4. SCHEDULE E: LOANS \$ -0 - 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ -0 - 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ -0 - 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. ZC 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ -0 - 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ - 0 -
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 8. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ -0-
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	4.	SCHEDULE E: LOANS	\$ -0 -
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ -0 - 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. 76 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ -0 - 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ -0 - 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ -0-
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS \$ 1,024. 76 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ -0 -
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ -0 -
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ - 0 - 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,024. 26
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0-
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ -0 -	11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ -0 -
	12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ -0 -

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Roel Cavazos	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor uut-of-state PAC (ID#:)	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code	<i>/</i>
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date Full name of contributor □ out-of-state PAC (ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code	•
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor □ out-of-state PAC (ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date Full name of contributor □ out-of-state PAC (ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	tions)
	-
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	EEDED

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

7	he Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A2:
2 FILER NAM	AE .		3 Filer ID (Ethics Commission Filers)
4 TOTAL C	OF UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$
5 Date	6 Full name of contributor		8 Amount of . 9 In-kind contribution Contribution \$. description
	7 Contributor address; City; State; Zlp Contributor	de	, ,
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	Check if travel outside of Texas. Complete Schedule T. er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	itor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u></u>	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of . In-kind contribution Contribution \$, description
	Contributor address; City; State; Zip Con	de	Check if travet cutside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIAL)(See Instructions)
Contributors	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
4-44-0-2			
	tradition to the Mark the restrict of the street constituting the special constitution of the popular participates and the property of the street constitution of the street constituti		
			

PLEDO	SED CONTRIBUTIONS			SCHEDULE B
The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedu	le B:
2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)
4 TOTAL OF	UNITEMIZED PLEDGES	······································	\$	
5 Date	6 Full name of pledgor		8 Amount of Pledge \$. 9 In-kind contribution description
	7 Pledgor address; City; State;			
			E	le of Texas. Complete Schedule T.
10 Principal occ	upation / Job title (See Instructions)	11 Employer (See	Instructions)	
Date	Full name of pledgor		Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State, 2	Zip Code		
	<u> </u>	· · · · · · · · · · · · · · · · · · ·		e of Texas. Complete Schedule T.
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of pledgor out-of-state PAC (ID#:_)	Amount of Pledge \$	in-kind contribution description
	Pledgor address; City; State; 2			
			Check If travel quitable	e of Texas. Complete Schedule T.
Principal occu	pation / Job title (See Instructions)	Employer (See	L v	е от техав. Оотприне запедије т.
Date	Full name of pledgor out-of-state PAC (ID#:		Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; 2	Cip Code	•	
		ļ	Check if travel outside	o of Texas. Complete Schedule T.
Principal occup	pation / Job title (See Instructions)	Employer (See		
1				
				,
,	ATTACH ADDITIONAL COPIES OF	FTHIS SCHEDULE	AS NEEDED	

LOANS			SCHEDULE E
The	Instruction Guide explains how to comp	olete this form.	1 Total pages Schedule E:
2 FILER NAME			3 Filer 10 (Ethics Commission Filers)
4 TOTAL OF U	NITEMIZED LOANS		\$
5 Date of loan	7 Name of lender out-of-state	PAC (IDS:)	9 Loan Amount (\$)
6 is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate
Y N			11 Maturity date
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instructions)	
14 Description of Coll	ateral	15 Check if personal funds were account (See Instructions)	deposited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
not applicable 20 Principal Occupat		State; Zip Code 21 Employer (See Instructions)	
ang kanggapan panggapan da dinikaban panggapan da panggapan da dinikaban panggapan da dinikaban panggapan da d Manggapan da dinikaban da dinikab			
Date of loan	Name of lender out-of-state i	, , , , , , , , , , , , , , , , , , , ,	Loan Amount (\$)
ls lender a financial Institution?	Lender eddress; City; S	State; Zip Code	Interest rate
Y N			Maturity date
Principal occupation	n / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	teral	Check if personal funds were account (See Instructions)	deposited into political
GUARANTOR INFORMATION	Name of guarantor	- Company of the Comp	Amount Guaranteed (\$)
/	Guarantor address; City; S	State; Zip Code	
not applicable	in (Con Instructions)	Employer (See Instructions)	
Principal Occupatio	u (Sea wandhouz)	Embloyer (see instructions)	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

		EXPENDITURE CATEG	ORIES FOR BOX 8(a)	
1	Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Credit Card Payment	Event Expense Fees Food/Beverage Expense By Gilt/Awards/Memorials Expense	i.oan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisipg Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	<i></i>	3 Filer ID (Ethics Commission Filers)
4	Date	5 Payee name		
5	Amount (\$)	7 Payee address; City; State; Zip	c) Code	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sol	Check If travel outs	side of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/ÓH	Candidate / Officeholder name H	Office sought	Office held
	Date	Payee name		
_	Amount (\$)	Payee address; City; State; Zip	p Code	
-	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch	Check if travel outsk	ide of Texas. Complete Schedule T. TX, officeholder living expanse
_	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
`.	Date	Payee name		
_	Amount (\$)	Payee address; City; State; Zip	Code	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this son	Check if travel outsic	ide of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Advertising Expense Accounting/Banking Food/Beverage Expense Glft/Awards/Memorials Expense Consulting Expense Contributions/Donations Made By Polling Expense Printing Expense Salaries/Wages/Contract Labor Vavel Out Of District Legal Services Candidate/Officeholder/Political Committee Other (enter a category not listed above) The Instruction Guide explains how to complete this form 1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **4** TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date 6 Payee name 7 Amount (\$) 8 Pavee address: City; State; Zip Code 9 TYPE OF Political Non-Political EXPENDITURE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Check if travel outside of Texas. Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate// Officeholder name Office sought Office held expenditure to benefit C/OH Paves name Date Amount (\$) ayee address; City; State; Zip Code TYPE OF Non-Political EXPENDITURE Political Category (See Categories listed at the top of this schedule) Description ___ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

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

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Accounting/Banking Fees Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) The instruction Guide explains how to complete this form 2 FILER NAME 1 Total pages Schedule F4: 3 Filer ID (Ethics Commission Filers) 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT ĆARD \$ 5 Date 6 Payee name 7 Amount (\$) 8 Payee address; City; State; Zip Códe TYPE OF **Political** Non-Political EXPENDITURE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE ___ Check if travel outside of Texas. Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate Officeholder name Office sought Office held expenditure to benefit C/OH Payer name Date Amount (\$) ayee address; City; State; Zip Code TYPE OF Political Non-Political **EXPENDITURE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. PURPOSE, OF Check If Austin, TX, officeholder living expense EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

	EXPENDITURE CATEGO	DRIES FOR BOX 8(a)	
Advertising Expense Accounting/Benking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	Fees Food/Severage Expense By Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Priming Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME ROEL COURZOS		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01-23-16		71 - Screen Pri	ntine
6 Amount (\$)	ABS Corporate Appar 7 Payee address; City: State; Zip C	Code	
\$ 560.00	1401 N. 28th St Har	lingen TX 785	হত
Reimbursement from political contributions intended		<u> </u>	
8 PURPOSE	(a) Category (See Categories listed at the top of this sched		
OF	Advertising Expens	j====	de of Texas. Complete Schedule T.
EXPENDITURE	Political Shirts	L Check it Austin, i.	X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	OH .	Office sought	Comeran Coont
	"Roel Cavazos	and the second s	Constable Pct-
Date	Payee name		
01-24-16	Chuys Custom Sp.	ports	
Amount (\$)			
\$239.02	160 E. Stenger St. San	Benito TX 78:	596
Figinibulsement from political contributions intended	32. 2.		
	Category (See Categories listed at the top of this sched	iule) (b) Description	
PURPOSE OF	Printing Expense	Check if travel outsid	le of Texas. Complete Schedule T.
EXPENDITURE	Digital Patches	Check if Austin, T	X, officatolder living expense
Complete ONLY If direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/C	Roel Cavazos		Cameron Count
Date	Payee name		CONSTUDIO
1-25-16	Chuy's Custom So	mate	
Amount (\$)	Pavee address: City: State: Zip C	ode	
\$ 113.64	160 E. Stenger St. Sc	an Benito TX 7	18586
Reimbursement from political contributions intended	ŭ		
PURPOSE	Category (See Categories listed at the top of this sched	1	
OF	Printing Expense	. —	la of Texas. Complete Schedule T.
EXPENDITURE	CSigns & Bumper Sticker Candidate / Officeholder name	S) L_1 Check if Austin, 17	X, officeholder living expense
Complete <u>ONLY</u> If direct expenditure to benefit C/C	Λμ ₋	Office sought	Cameron County
experience to beliefit or	Roel Cavazos		Constable Pct 3

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

	EXPEND	TURE CATEGORIE	S FOR BOX 8(a)		
Advertising Expense Accounting/Sanking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment	cal Committee Legal Services	Office Expense Polling Portals Expense Printin	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense as/Wages/Contract Labor to complete this form.	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule G:	2 FILER NAME	azos		3 Filer ID (Ethics Commission Filers)	
4 Date 01-25-16	5 Payee name Tejono Mo	-1			
6 Amount (\$) \$ 29.09 Greimbursement from political contributions intended		Dr. Harl	·	18550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories liste	d at the top of this schedule)	[[[]	ø of Texas. Complete Schedule T. X., officeholder living expense	
9 Complete <u>ONLY</u> If direct expenditure to benefit C/	11 1 /	ler name	Office sought	Office held Corneron County Constable	RH
Date	Payee name				
01-25-16 Amount (\$)	Home Dec	OT State; Zip Code	——————————————————————————————————————		
\$ 42.67 Reinibursement from political contributions intended	4710 South 1	Expressivay	83 Harlinge	n TX 78550	
PURPOSE OF EXPENDITURE	Category (See Categories liste Screws, Cable		1	e of Texas. Complete Schedule T. K, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/4	11 . ^	er name	Office sought	Cameron Canty Canstable Pct. 3	
Date	Payee name				
01-28-16	Stripes				
Amount (\$)	Payee address; C	State; Zip Code	TV 70505		
Reimbursement from political contributions intended	28281 FM 10L	o NIO ITONO	TX 78583		
PURPOSE OF EXPENDITURE	Category (See Categories liste	d at the top of this schedule)	1 —	e of Texas. Complete Schedule T. K, afficeholder fiving expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officehold Roel Covaz		Office sought	Cameron Canty Canstable Pct.3	
······································	·	 			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gilfi/Awards/Memorials Expense Loan Repayment/Relimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Other (enter a category not listed above) Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Roel Cavazos 5 Payee name The Home Depot
7 Payee address; City; State; Zip Code 2-01-16 6 Amount (\$) 4710 South Expressway 83 Harlingen TX 78550 \$10.81 Reimbursementirom political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE ___ Check if travel outside of Texas. Complete Schedule T. OF Cable Ties EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Cameron Count Office sought 9 Complete ONLY If direct expenditure to benefit C/OH Roel Carazos Constable & Rets Payee name Date City; State; Zip Code Amount (\$) Payee address; Reimbursement from political contributions Intended (b) Description Category (See Categories listed at the top of this schedule) PURPOSE Check if travel outside of Texas. Complete Schedule T. ___ Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name City; State; Zip Code Amount (\$) Pavee address: Reimbursementirom political contributions intended (b) Description Category (See Categories listed at the top of this schedule) PURPOSE Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE Check if Austin, TX, officeholder flying expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE H

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

Event Expense Fees Food/Beverage Expense Glif/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains ho	ow to complete this form.	Onto (Critici a Callegary Hot flotati above)
1 Total pages Schedule H:	2 FILER NAME		3 Filer 10 (Ethics Commission Filers)
4 Date	5 Business name		
6 Amount (\$)	7 Business address; City; State; Zip Co	ode	And the second s
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul	Check if travel outside o	of Texas. Complete Schedule T. officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Business name		
Amount (\$)	Business address; Cly; State; Zip Co	rde	
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this schedule	Check if travel outside of	Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Business name		
Amount (\$)	Business address; City; State; Zip Cod	ek	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this achedule)	Check if travel outside of	Texas. Complete Schedule T. fficeholder fiving expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule i:	2 FILERNAME	3 Filer ID (Ethics Commission Filers)			
4 Date	5 Payee name				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zlp Code				
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE O F EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			
	τ.				

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

SCHEDULE K

Th	1 Total pages Schedule K:	
2 FILER NAMI		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	6 Address of person from whom amount is received; City;	State; Zip Code
	7 Purpose for which amount is received	neck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City;	State; Zip Code
	Purpose for which amount is received Ch	eck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City;	State; Zip Code
	Purpose for which amount is received Che	eck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City;	State; Zip Code
	Purpose for which amount is received Che	ck if political contribution returned to filer
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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee 5 Contribution / Expenditure reported on: Schedule D __ Schedule F1 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule F2 Schedule F4 Schedule G Schedute H Schedule COH-UC Schedule B-SS 7 Name of person(s) traveling 6 Dates of travel 8 Departure city or name of departure location 9 Destination city or name of destination location 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Contribution / Expenditure reported on: Schedule B(J) Schedule D Schedule A2 Schedule B Schedule C2 Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B-SS Name of person(s) traveling Dates of travel Departure city or name of departure location Destination city or name of destination location Means of transportation Purpose of travel (including name of conference, seminar, or other event) Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1 Schedule G Schedule H Schedule COH-UC Schedule B-SS Schedule F2 Schedule F4 Dates of travel Name of person(s) traveling Departure city or name of departure location Destination city or name of destination location Means of tra/sportation Purpose of travel (including name of conference, seminar, or other event)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how to complete this form Complete only if "Report Type" on page 1 is marked "Final Report"				
1	C/OH	NAME Roel Carazus	2 Filer ID (Ethics Commission Filers)		
3	SIGN	ATURE			
	ing a r	t expect any further political contributions or political expenditures in connection with neport as a final report terminates my campaign treasurer appointment. I also undersutions or make any campaign expenditures without a campaign treasurer appointment	stand that I may not accept any campaign		
		Signa	ture of Candidate / Officeholder		
4		WHO IS NOTAN OFFICEHOLDER oplete A & B below <i>only</i> if you are not an officeholder. •-			
	A.	CAMPAIGN FUNDS			
	Chec	k only one:			
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.			
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.			
	B.	ASSETS			
	Chec	conly one:			
		I do not retain assets purchased with political contributions or interest or other incom-	me from political contributions.		
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understant that I may not convert assets purchased with political contributions or interest or other income from political contributions in personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.				
		-	Signature of Candidate		
		HOLDER blete this section <i>only</i> if you are an officeholder ••			
		I am aware that I remain subject to filing requirements applicable to an officeholder who file. I am also aware that I will be required to file reports of unexpended contributions if, officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	after filing the last required report as an		