MR. BENJAMINE BURESTI JR

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT



				T		
The JC/OH ins	struction	Guide explains how to com	olete this form.	1 Filer ID (Ethics Commis	sion Eilers)	2 Total pages filed:
				00019971	Sion i notoy	20
3 CANDIDAT OFFICEHO		MS/MRS/MR	FIRST		МІ	OFFICE USE ONLY
NAME	LDER	The Honorable 🗷	Benjamin			Date Received
		·				ELECTRONICALLY FILED
		NICKNAME	LAST		SUFFIX	" 07/13/2016 CAMERON COUNTY DEPARTMENT OF PLECTIONS &
			Euresti	:	Jr.	
4 CANDIDAT	E/	ADDRESS / PO BOX; APT	/SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHO MAILING		974 E. Harrison				Receipt# Amount (1706)
ADDRESS						PRICEIVED 11:30
Change of	f Address	Brownsville, TX 78520				The Processer
-						Date Imaged
5 CAMPAIGN	N .	MS/MRS/MR	FIRST			MI
TREASUR	-	Mrs.	Berlinda			
NAME						
		NICKNAME	LAST	***************************************	**************************************	SUFFIX
			Euresti			
6 CAMPAIGN		STREET ADDRESS (NO PO	BOX PLEASE);	AP.	r / SUITE #; CITY	STATE; ZIP CODE
TREASUR ADDRESS		32364 San Carlos Rd.				•
(Residence or	Business)				•	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	Los Fresnos, TX 78566				
7 CAMPAIGI	N	AREA CODE PHO	NE NUMBER	EXTENSION		
TREASUR		(956) 592-0236				
PHONE		,				
8 REPORT TYPE			7 00/2 1		ъ	15th day ofter compaign transurar
ITPE		January 15	30th day before	e election	Runoff	15th day after campaign treasurer appointment (officeholder only)
		X July 15	8th day before	election	Exceeded \$500 limit	Final Report (Attach C/OH-FR)
9 PERIOD		Month Day Year			Month Day	Year
COVERED	,	01/01/2016	ТІ	HROUGH	06/30/20	16
40 51 505101	1	ELECTION DATE			ELECTION TYPE	
10 ELECTION	N .	ELECTION DATE Month Day Year	l ,,.	Primary	ELECTION TYPE Runoff	Other
		11/04/2014				
			X	General	Special	
44 055105		OFFICE HELD (# am.)			12 OFFICE SOUGH	T (if known)
11 OFFICE		OFFICE HELD (if any) District Judge District 10	7 Cameron		District Judge D	
		District outige District 10	Juneion		District stage L	
			GO.	TO PAGE 2		
l			30	, , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

2 of 20

				2 of 20
13 C / OH NAME	Euresti Jr., Benjamin	(The Honorable)	14 Filer ID 00019971	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expenditu These expenditures may have been made without to officeholders are required to report this information	he candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE			
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		·		
		COMMITTEE CAMPAIGN TREASURER NAME		
·		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTIBUTION TOTALS	1. TOTAL POLITIC LOANS, OR GU	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 0.0
		ICAL CONTRIBUTIONS	0)	\$ 0.0
EXPENDITURE		PLEDGES, LOANS, OR GUARANTEES OF LOAN AL EXPENDITURES OF \$100 OR LESS, UNLESS		\$ 0.0
TOTALS				\$ 0.0
	4. TOTAL POLIT	ICAL EXPENDITURES	•	\$ 3,429.0
CONTRIBUTION BALANCE	REPORTING PE			\$ 6,628.7
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.0
17 AFFADAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the ac Il information required	ccompanying report is to be reported by me
	MARIA G CORTINA Notary Public, State of Texas My Commission Expires	Signature o	f Candidate or Officeho	older
AFFIX NO	02-05-2019 DTARY STAMP / SEAL AB	FILED: 7/13/16 - TX	-100636779	
	scribed before me, by the s	said	, this the	274 day
of)u	, 20 <u> [</u>	ertify which, witness my hand and seal of office.		
May 1)	(c)	m- 661.	~ A	0.10
Signature of off	ficer administering oath	Printed name of officer administering oath	Title of object	er administering oath
Signature of the	noor administrating oder		2. 2.00	J

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			- C(3 of 20
18 FILE Eure		nE , Benjamin (The Honorable)	19 Filer ID 00019971	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$
2.			\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	X		\$ 3,429.09	
6.		\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$
8.		\$:		
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS O	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 440.68

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Waces/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Gift/Awards/Memorials Expense 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. (Ethics Commission Filers) Filer ID Total pages Schedule F1: 2 FILER NAME 00019971 Euresti Jr., Benjamin (The Honorable) Sch: 1/16 Rpt: 4/20 Date Payee name 06/11/2016 Campos, Brandon City; State; Zip Code Payee address; Amount (\$) 45 Las Villas \$50.00 Brownsville, TX 78520 (b) Description PURPOSE (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Graduation gift Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 05/31/2016 Cheddar's Restaurant Payee address; State: Zip Code City: Amount (\$) \$104.74 2495 Highway 83 Brownsville, TX 78520 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner for Hanna High School Strutters dance officers Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 05/09/2016 Daily Grill State; Zip Code Payee address; Amount (\$) 13270 Dallas Parkway \$52.36 Dallas, TX 75240 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Spring Regional Judicial Conference Office held Office sought Complete ONLY if direct Candidate/Officeholder name 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
Credit Cord Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/16 Rpt: 5/20	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	05/09/2016	Daily Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.65	13270 Dallas Parkway
		Dallas, TX 75240
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
		Spring Regional Judicial Conference
		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/OI	
_	Date	Payee name
	01/14/2016	Dan Sanchez Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	501 East Tyler Avenue
	•	
		Harlingen, TX 78550
<u> </u>	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Campaign contribution
	·	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	06/17/2016	Dance Infinity Academy
	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	275 Kings Highway
1		Brownsville, TX 78520
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EVERINITORE	Check if Austin, TX, officeholder living expense Advertisement in program
ĺ		Advertisement in program
L	Complete ONII V is direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Carlateter Chinasina in Carla
L		
1		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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 Co		mmittee	Food/Beverage E Gift/Awards/Mem Legal Services		Poiling EX Printing E Salaries/	xpens			Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
			The Instruction Guide explains how to complete this form.							·	
1	Total pages Schedule F1:	2	FILER NAM	Ε					3	Filer ID	(Ethics Commission Filers)
	Sch: 3/16 Rpt: 6/20		Euresti Jr., Benjamin (The Honorable)							00019971	
4	Date	5									
	04/20/2016		Down By T	he Border							
6	Amount (\$)	7	Payee addre	-	Stat	te; Zip Co	ode				
	\$175.00		15 W. Mad	ison							
			Suite A								
		L	Brownsville	e, TX 78520							
8	PURPOSE OF	(a			ed at the top of this s	schedule)	(b)	Description	outei	de of Texas. Com	nlete Schedule T
	EXPENDITURE			ns/Donation: Officeholder	s made By /Political Com	mittee		<u> </u>		, officeholder living	
					.,			Special Need	ds c	hildren	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder nan	ne	Office so	ught			Office he	eld
	Date		Payee name)							
	02/13/2016		Dubernay,	Felicia							
	Amount (\$)		Payee address; City; State; Zip Code								
	\$50.00	1	4653 Lake	way							
	Bro			e, TX 78520							
	PURPOSE	(a	Category (See Categories list	ed at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE		Continuations/Donations Made by					side of Texas. Complete Schedule T. (, officeholder living expense			
]	Candidate	Onicendider	/Political Coll	mmee		Baby shower		, • • • • • • • • • • • • • • • • • • •	,
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder nan	ne	Office so	ught			Office he	eld
F	Date	T	Payee name	2							
	04/25/2016		Faulk Midd	dle School							
	Amount (\$)	T	Payee addr	ess; City;	Sta	ite; Zip C	ode				
	\$25.00		200 Roose	evelt Street							
İ											
			Brownsvill	e, TX 78520						. 100	
	PURPOSE OF	(a			ted at the top of this	schedule)	(b)	Description			ulata Bahadula T
	EXPENDITURE			ns/Donation /Officeholder	is Made By r/Political Com	mittee		ш		side of Texas. Com (, officeholder living	•
			Canadate	Milocriolaci	// Ontion Con	ii		Fundraiser			
Г	Complete ONLY if direct		Candidate/O	fficeholder nar	ne	Office so	ught			Office h	eld
	expenditure to benefit C/C	H									

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/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 Credit Card Payment	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 File							
Sch: 4/16 Rpt: 7/20	Euresti Jr., Benjamin (The Honorable) 00019971							
4 Date	5 Payee name							
01/26/2016	Garcia, Chris							
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 6745 Paredes Road							
	Brownsville, TX 78526							
8 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 Medical expenses							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
02/02/2016	Girl Scout Troop #365							
Amount (\$) \$96.00	Payee address; City; State; Zip Code 111 Country Club 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 Candidate/Officeholder/Political Committee Girl Scout cookies							
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H							
Date	Payee name							
04/17/2016	Good Shepherd Community Church							
Amount (\$) \$50.00	Payee address; City; State; Zip Code 300 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/C	Candidate/Officeholder name Office sought Office held							

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 Fond/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The instruction Guide explains how to complet	e this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethlos Commission Filers)
Sch: 5/16 Rpt: 8/20	Euresti Jr., Benjamin (The Honorable)	00019971
4 Date	5 Payee name	
05/16/2016	Good Shepherd Community Church	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$70.00	300 Morrison	
	Brownsville, TX 78520	
8 PURPOSE	(Soo bately is the state of the	Description
OF 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
		Church donation
	·	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	H	
Date	Payee name	
06/19/2016	Good Shepherd Community Church	
Amount (\$)	Payee address; City; State; Zip Code	
\$50.00	300 Morrison	
	Brownsville, TX 78520	
PURPOSE	1	Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texes. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Church donation
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	
Date	Payee name	
05/24/2016	H.E.B.	
Amount (\$)	Payee address; City; State; Zip Code	
\$54.95	2250 Boca Chica Boulevard	
	Brownsville, TX 78520	
PURPOSE	(See Sategories listed de the Lop of this service)	Description
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Birthday gift card for staff
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundralsing Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guide expl	ains how to con	plete this form.				
1.	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	(Ethics Com	mission Filers)
	Sch: 6/16 Rpt: 9/20	Euresti Jr.	, Benjamin (The Honora	ble)			00019971		
4	Date	5 Payee name	e				,		
	04/26/2016	Hanna Hig							
6	Amount (\$)	7 Payee addr	ess; City; S	State; Zip Cod	le				
	\$50.00	2615 East	Price Road						
	•	Brownsville	e, TX 78520						
-	PURPOSE				(b) Description				<u> </u>
8	OF		See Categories listed at the top of the ons/Donations Made By	nis schedule)		lout	side of Texas. Com	plete Schedule T	
	EXPENDITURE		/Officeholder/Political Co	ommittee	Check if Austi	in, TX	ر, officeholder living	expense	
					Special Olyn	npi	cs		
									1-1-1
9	Complete ONLY if direct		fficeholder name	Office soug	iht		Office he	eld	
	expenditure to benefit C/OI	H							
-	Date	Payee nam	e				mras, ·		
	05/28/2016	Isla Grand							
-	Amount (\$)	Payee addr	ess; City; S	State; Zip Cod	de				
	\$38,42	i '	Boulevard						•
	·								
		South Pac	ire Island, TX 78597						
L	PURPOSE		······································		(b) Description				
	OF		(See Categories listed at the top of the	nis schedule)	`	el out	side of Texas. Com	plete Schedule 1	г.
	EXPENDITURE	POOG/Bev	erage Expense		$\boldsymbol{\sqcup}$		X, officeholder living		
					Fifth Region	C	onference		
	•								
_	Complete ONLY if direct		fficeholder name	Office sou	jht		Office he	eld	
	expenditure to benefit C/O	H							
F	Date	Payee nam	ρ						
	04/28/2016	1 '	stro Restaurant						
H	Amount (\$)	Payee add		State; Zip Co	de .				
	\$84.11	1	Ringgold Street	310.0, 2.p 00.					
	Φ04.1.1	000 Lasi i	Alliggold Sacct						
		Dunium av dill	L TV 70500		•				
L			le, TX 78520	i i	FR 5				
l	PURPOSE OF	E	(See Categories listed at the top of t	his schedule)	(b) Description	-l	side of Texas. Com	relata Cabadula 1	
l	EXPENDITURE	Food/Bev	erage Expense				X, officeholder livin		1,
l							(Secretary's		
	•								
\vdash	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	aht		Office h	eld	
	expenditure to benefit C/O		THE SHOWER HATTIE	-11100 000	y		3511		
L									
1									

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 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)

Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID (Ethics Commission Filers) Total pages Schedule F1: 2 FILER NAME 3 00019971 Sch: 7/16 Rpt: 10/20 Euresti Jr., Benjamin (The Honorable) Date Payee name Keko's Bistro Restaurant 05/24/2016 Payee address; City; State; Zip Code Amount (\$) 660 East Ringgold Street \$54.20 Brownsville, TX 78520 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Birthday luncheon for staff Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 04/04/2016 Little Miss Kickball Payee address: City; State; Zip Code Amount (\$) \$50.00 24 W. Los Ebanos Brownsville, TX 78520 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Fundraiser Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Los Fresnos High School 02/01/2016 State; Zip Code Payee address; City; Amount (\$) \$21.00 907 N. Arroyo Boulevard Los Fresnos, TX 78566 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Girls basketball Office held Office sought Candidate/Officeholder name Complete ONLY if direct 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
Credit Card Reviewal

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing 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 how to complete this form. (Ethics Commission Filers) Total pages Schedule F1: 2 FILER NAME 3 Filer ID 00019971 Sch: 8/16 Rpt: 11/20 Euresti Jr., Benjamin (The Honorable) Date Payee name Los Fresnos High School 03/03/2016 State; Zip Code Payee address; City; Amount (\$) 907 N. Arroyo Boulevard \$100.00 Los Fresnos, TX 78566 **PURPOSE** (b) Description 8 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Junior Class Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Los Fresnos High School 03/04/2016 Pavee address: City: State; Zip Code Amount (\$) 907 N. Arroyo Boulevard \$44.00 Los Fresnos, TX 78566 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Softball team Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 06/21/2016 Oyster Bar State: Zip Code Amount (\$) Payee address; City; \$160.20 1057 East Levee Street Brownsville, TX 78520 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check If Austin, TX, officeholder living expense Birthday luncheon for constituents Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/16 Rpt: 12/20	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	02/13/2016	Pena, Minerva
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1900 Coffee Port Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF 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 Baby shower
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	06/18/2016	Peter Piper Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.80	1644 Central Boulevard
		Brownsville, TX 78520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel duside of Texas. Complete Scriedule 1. Check if Austin, TX, officeholder living expense
		Hanna High School dance team
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Г	Date	Payee name
	02/04/2016	Primera Iglesia Presbiteriana
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	616 E. Jefferson
		Brownsville, TX 78520
	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	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Church donation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/C	•
r		

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)

Credit Card Payment The instruction Guide explains how to complete this form. (Ethics Commission Filers) 3 Filer ID Total pages Schedule F1: 2 FILER NAME 00019971 Euresti Jr., Benjamin (The Honorable) Sch: 10/16 Rpt: 13/20 Date Payee name 04/04/2016 Puente, Ernesto State; Zip Code Amount (\$) Pavee address: City; \$100.00 32695 Oro Street Los Fresnos, TX 78566 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Funeral** expenses Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 05/24/2016 Rodriguez, Leticia F. State: Zip Code Payee address; City; Amount (\$) \$100.00 196 Heritage Farms Eagle Pass, TX 78852 Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee School trip Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 02/11/2016 Sam's Club Payee address; City; State; Zip Code Amount (\$) 3570 West Alton Gloor Road \$74.54 Brownsville, TX 78520 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Fundraiser for Los Fresnos High School

Version V1.0.47

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(plates/plastic ware)

Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	ommittee Legal	wards/Memorials Expense Services Instruction Guide explains	Printing Expens Salaries/Wages how to comple	/Contract Labor	Travel Out of Disi OTHER (enter a	irict category not listed above)
1	Total pages Schedule F1:	FILER NAME			3	Filer ID	(Ethics Commission Filers)
_	Sch: 11/16 Rpt: 14/20	Euresti Jr., Benj	amin (The Honorable)	·		00019971	
4	Date 03/10/2016	Payee name San Benito Ran	gerville Beef Syndicat				
6	Amount (\$) \$50.00	Payee address; 450 South Willia San Benito, TX	ms Road	e; Zip Code			
8	PURPOSE OF EXPENDITURE	Contributions/De	egories listed at the top of this so onations Made By eholder/Political Comr		Description Check if travel outs Check if Austin, TX Fundraiser		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeho	lder name	Office sought		Office he	eld
	Date 05/10/2016	Payee name Schulze's BBQ					
	Amount (\$) \$25.71	Payee address; 1218 1st Street Rosenberg, TX		e; Zip Code			
	PURPOSE OF EXPENDITURE	a) Category (See Cat Food/Beverage	egorles listed at the top of this so Expense	chedule) (b)	Description Check if travel outs Check if Austin, TX Spring Regiona	t, officeholder living	g expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeho	older name	Office sought		Office he	əld
	Date 05/10/2016	Payee name Schulze's BBQ					
	Amount (\$) \$14.61	Payee address; 1218 1st Street Rosenberg, TX	,	e; Zip Code			
	PURPOSE OF EXPENDITURE	a) Category _{(See Ca} Food/Beverage	tegories listed at the top of this se Expense	chedule) (b)	Description Check if travel out: Check if Austin, TO Spring Regiona	K, officeholder livin	g expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeho	older name	Office sought		Office h	eld

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
Glft/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Political		Legal Services	Salaries/V	Vages/	/Contract Labor	OTHER (enter a	category not listed a	ibove)
	Credit Card Payment		The Instruction Guide	explains how to co	mple	te this form.			
1	Total pages Schedule F1:					•	3 Filer ID	(Ethics Commis	sion Filers)
	Sch: 12/16 Rpt: 15/20	Euresti Jr.,	Benjamin (The Hon	orable)			00019971		
4	Date	5 Payee name							
	05/27/2016	Sea Ranch	Restaurant					4.	
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$120.31	1 Padre Bo	oulevard						
		South Pad	re Island, TX 78597						
8	PURPOSE	(a) Category (s	See Categories listed at the top	o of this schedule)	(b)	Description			
	OF EXPENDITURE	•	rage Expense	•			outside of Texas. Com		
	EXPENDITORE						ı, TX, officeholder living) expense	
						Fifth Region	Conterence		
	·	<u></u>			Ļ			.1.1	<u> </u>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıght		Office he	BI Q .	
	experialitate to belief of or								
	Date	Payee name							
	02/01/2016	Texas Cer	ter for the Judiciary						
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode				
	. \$60.00	1210 San .	Antonio Street				•		
		Suite 800		•					
		Austin, TX	78701				•		
_	PURPOSE	(a) Category	See Categories listed at the top	o of this schedule)	(b)	Description			
	OF EXPENDITURE	Registration				<u> </u>	outside of Texas. Con		
	EXPENDITORE	1					n, TX, officebolder livin nference in Hot		May 0-10
				•		2016	illeterice ili rioi	JSIUII, TEXAS,	Way 5-10,
_		0 0144	E - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	O#ing no	L abt		Office h	old	i
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ugnt		Onice ii	elu	•
L	<u>'</u>	<u> </u>							
	Date	Payee nam							•
L	05/10/2016		ter for the Judiciary						
	Amount (\$)	Payee addr	=	State; Zip C	ode				
ĺ	\$22.00	Į.	Antonio Street						
		Suite 800							
		Austin, TX	78701						
Г	PURPOSE	(a) Category	See Categories listed at the to	p of this schedule)	(b)	Description		-	
	OF EXPENDITURE		ons/Donations Made			ш	l outside of Texas, Con	•	÷
l	EXI ERDITORE	Candidate	/Officeholder/Politica	al Committee		Coffee cups	n; TX, officeholder livin	g expense	
					1	Conce oups			
\vdash	Complete ONI V if direct	Candidate/O	fficeholder name	Office so	unbt		Office h	eld	
	Complete ONLY if direct expenditure to benefit C/O		moendiuei name	Office Su	uynt		Onicen	ioid	
L								0.454	
							-		•
1									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

entising Expense Event Expense Loan Repayment/Reimbu

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F1:										
	Sch: 13/16 Rpt: 16/20	L	Euresti Jr., Benjamin (The Honorable) 00019971								
4	Date	5	5 Payee name								
	06/08/2016		Texas Center for the Judiciary								
6	Amount (\$)	7	Payee address; City; State; Zip Co	de							
	\$250.00		1210 San Antonio Street								
			Suite 800								
			Austin, TX 78701								
8	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		Registration fees		Check if Austin, TX, officeholder living expense						
					Annual Judicial Conference in San Antonio, Texas,						
					September 6-9, 2016						
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	ight	Office held						
	expenditure to benefit C/O	H 									
	Date	Π	Payee name								
	01/15/2016		Texas Democratic Party								
	Amount (\$)		Payee address; City; State; Zip Co	ode							
	\$10.00		707 Rio Grande Street								
		Austin, TX 78701									
	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						
		1	Cardidate/Onicerolder/Political Committee		Democratic Party contribution						
	Complete ONLY if direct		Candidate/Officeholder name Office so	ight	Office held						
	expenditure to benefit C/O	H									
	Date	Γ	Payee name								
	02/15/2016		Texas Democratic Party		·						
	Amount (\$)		Payee address; City; State; Zip C	ode							
	\$10.00		707 Rio Grande Street								
			Austin, TX 78701								
Γ	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. Check if Austin, TX, officeholder living expense						
			Candidate/Officeholder/Political Committee		Democratic Party contribution						
					•						
┝	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held						
	expenditure to benefit C/O			-							

SCHEDULE F1

	PARTINE ALTA	DIEC COD DOV C(-)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment		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)
Total pages Schedule F1:	2 FILER NAME	-	3 Filer ID (Ethlcs Commission Filers)
Sch: 14/16 Rpt: 17/20	Euresti Jr., Benjamin (The Honorable))	00019971
Date 03/15/2016	5 Payee name Texas Democratic Party		
6 Amount (\$) \$10.00	7 Payee address; City; State 707 Rio Grande Street	e; Zip Code	
	Austin, TX 78701		
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Contributions/Donations Made By Candidate/Officeholder/Political Com	Check if trave Check if Austi	ol outside of Texas. Complete Schedule T. In, TX, officeholder living expense Party contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name OH	Office sought	Office held
Date	Payee name		
04/15/2016	Texas Democratic Party		•
Amount (\$) \$10.00	Payee address; City; Stat 707 Rio Grande Street	e; Zip Code	
•	Austin, TX 78701		
PURPOSE OF	(a) Category (See Categories listed at the top of this so Contributions/Donations Made By	Check if trave	el outside of Texes. Complete Schedule T. tin, TX, officeholder living expense
EXPENDITURE	Candidate/Officeholder/Political Com		Party contribution
	Candidate/Officeholder/Political Com Candidate/Officeholder name		
EXPENDITURE Complete ONLY if direct	Candidate/Officeholder/Political Com Candidate/Officeholder name	Democratic	Party contribution
EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder/Political Com Candidate/Officeholder name OH	Democratic	Party contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Texas Democratic Party Payee address; City; State	Democratic	Party contribution
Complete ONLY if direct expenditure to benefit C/O Date 05/10/2016 Amount (\$)	Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Texas Democratic Party Payee address; City; State	Democratic Office sought	Party contribution
Complete ONLY if direct expenditure to benefit C/O Date 05/10/2016 Amount (\$)	Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Texas Democratic Party Payee address; City; State 707 Rio Grande Street	Democratic Office sought The property of the	Party contribution

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense.
Glft/Awards/Memorials Expense

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
OTHER (enter a category not listed above)

OTHER (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) Total pages Schedule F1: 2 FILER NAME 00019971 Sch: 15/16 Rpt: 18/20 Euresti Jr., Benjamin (The Honorable) Date Payee name **Texas Democratic Party** 06/10/2016 City; State; Zip Code 6 Amount (\$) Payee address: \$10.00 707 Rio Grande Street Austin, TX 78701 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Democratic Party contribution Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 05/09/2016 The Oceannaire Seafood Room State: Zip Code Amount (\$) Payee address; City: \$105.80 13340 Dallas Parkway Dallas, TX 75240 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Spring Regional Judicial Conference Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 06/16/2016 Vallejo, Anil David Payee address; State; Zip Code Amount (\$) 9420 Colonada North \$50.00 Brownsville, TX 78521 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Wedding gift Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

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

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

Event Expense
Fees
Food/Beverage Expense
Gilt/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 (anter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) 00019971 Sch: 16/16 Rpt: 19/20 Euresti Jr., Benjamin (The Honorable) Date Payee name 06/25/2016 Vela, Juan & Brianna Amount (\$) Payee address: City: State; Zip Code \$50.00 355 Cowan Terrace West Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Wedding gift Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/25/2016 Walmart Payee address; City; State; Zip Code Amount (\$) \$72.77 3500 W. Alton Gloor Brownsville, TX 78520 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Easter gifts for staff Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 05/12/2016 Westin Galleria Payee address; State; Zip Code Amount (\$) City: \$408.92 5060 West Alabama Houston, TX 77056 **PURPOSE** (b) Description (a) Category (See Categories #sted at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Hotel expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Spring Regional Judicial Conference Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K CONTRIBUTIONS RETURNED TO FILER 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 20/20 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 00019971 Euresti Jr., Benjamin (The Honorable) 8 Amount (\$) 5 Name of person from whom amount is received \$60.00 05/31/2016 Fifth Administrative Judicial Region 6 Address of person from whom amount is received; City; State; Zip Code 200 N. Almond Street Alice, TX 78332 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for Spring Regional Conference registration fees Amount (\$) Name of person from whom amount is received Date \$35.00 06/16/2016 Fifth Administrative Judicial Region Address of person from whom amount is received; City; State; Zip Code 200 N. Almond Street Alice, TX 78332 ☐ Check if political contribution returned to filer Purpose for which amount is received Reimbursement for Fifth Region Conference registration fees Amount (\$) Name of person from whom amount is received Date 06/07/2016 \$345.68 Texas Center for the Judiciary Address of person from whom amount is received; City; State; Zip Code 1210 San Antonio Street Suite 800 Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for Spring Regional Conference expenses