MR. DAN SANCHEZ

OVER SHEET PG 1 DIAI pages filed: 9 OFFICE USE ONLY CAMERON COUNTY PARTMENT OF ELECTIONS 8 VOTER REGISTRATION JUL 1 5 2016 Inand-delivered REGENVERONKED Processed STATE; ZIP CODE TX 78552
OFFICE USE ONLY CAMERON COUNTY PARTMENT OF ELECTIONS & VOTER REGISTRATION JUL 1 5 2016 Iand-delivered REGISTRATION Trocessed STATE; ZIP CODE
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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

					2 of 1.3			
13 C / OH NAME	Sanchez, Daniel		14 Filer ID	* .				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure. These expenditures may have been made without to officeholders are required to report this information.	the candidate's or officeh	nolder's knov	vledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		 				
	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS					
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	3)	\$	7,950.00			
EXPENDITURE TOTALS								
		AL EXPENDITURES		\$	11,459.24			
CONTRIBUTION BALANCE	REPORTING PE			\$	5,000.00			
OUTSTANDING LOAN TOTALS	6, TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$	0.00			
17 AFFADAVIT		I swear, or affirm, under penalty true and correct and includes al						
	KRYSTAL MALLEN lotary ID # 128581747 My Commission Expires April 13, 2019	under Title 15, Election Code.						
		Signature of	Candidate or Officehold	ler				
AFFIX NO	TARY STAMP / SEAL ABO	OVE						
	cribed before me, by the sa	aid <u>Daniel SancheZ</u> ertify which, witness my hand and seal of office.	, this the\S		_ day			
Signature of office	cer administering	Krystal Mallen Printed name of officer administering	NOTAMA Title of officer	Augh) administerin	C g oath			

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 13 19 Filer ID **18 FILER NAME** Sanchez, Daniel 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 7,950.00 X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS 4. \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11,459.24 X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10, SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11.

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

12.

TO FILER

\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/3 Rpt: 4/13 2 FILER NAME 3 Filer ID Sanchez, Daniel 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#:_ 05/16/2016 Abrego, Everardo \$200,00 6 Contributor address; City; State; Zip Code 2702 Live Oak Street Mission, TX 78574 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#; \$400.00 05/18/2016 Bonilla, Ruben Contributor address; City; State; Zip Code P.O. Box 5080 Corpus Christi, TX 78465 Principal occupation / Job title (See Instructions) Employer (See Instructions) Investments Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$200.00 05/16/2016 Campos, Gene & Bertha Contributor address; City; State; Zip Code 2620 Lotus Harlingen, TX 78550 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Banker Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$500.00 05/17/2016 Chapa, Paul Contributor address; City; State; Zip Code 8022 Saint Laurent Corpus Christi, TX 78414 Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 05/18/2016 \$250.00 Gowen, Elizondo Contributor address; City; State; Zip Code 555 N. Carancahua STE 1400 Corpus Christi, TX 78401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney

	MONET	Α	RY POLITICAL CONTRIE	3UTIOI	NS		SCHEDUL	LE A1
	The Instru	cti	on Guide explains how to complet	te this fo	rm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/13	
2	FILER NAME Sanchez, Da		el			3	Filer ID	
4	Date 05/20/2016	5	Full name of contributor out-of-state Hodge & Sherhold,	PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
		6	Contributor address; City; State; Zip Code 1534 E. 6th Street STE 105					
		L	Brownsville , TX 78520			L		
8		•	tion / Job title (See Instructions)	9	Employer (See Instructions))		
	D Horn	ey		<u> </u>	Attorney			
	Date 05/18/2016	A7020	Contributor address; City; State; Zip Code P.O. Box 17428		1 Blair, Sumson		Amount of Contribution (\$)	\$1,500.00
	Dringing occi	L nat	Austin, TX 78760 tion / Job title (See Instructions)	—г	Employer (See Instructions	<u> </u>		
	Attorneys	μαιι	IOH / JOD BBC (OCC HISBACHORS)	1	Embioher (Gee managravia)	,		
							Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:) 05/16/2016 Prestige Home Builders						Allount of Continueson (4)	\$1,300.00
	,		Contributor address; City; State; Zip Code					, _,
	:		28010 Roberta Rd					
	!							
		L	San Benito , TX 78586					
	Principal occu	-	tion / Job title (See Instructions)		Employer (See Instructions)		ĺ
			Home Bulders					
	Date	Γ	Full name of contributor out-of-state	PAC (ID#:			Amount of Contribution (\$)	
	05/18/2016		Primo Manufacturing		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$1,000.00
	I		Contributor address; City; State; Zip Code					
	!		2403 N. 10th Street Suite B					
	!		McAllen, TX 78501					
	Principal occu	pat	tion / Job title (See Instructions)		Employer (See Instructions)		
	Monu	٠.	•		, -	•		
	Date	Γ	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)	
	05/29/2016		Salazar Insurance Group					\$1,000.00
	l		Contributor address; City; State; Zip Code	***************************************				
	l		611 E. Loop 499					
			Harlingen, TX 78550					
	Principal occu	pat	tion / Job title (See Instructions)		Employer (See Instructions)		
			Insuran Sales				<u> </u>	

N	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDUI	E A1
Т	he Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/13	
	ILER NAME anchez, Da	nie!		3 Filer ID	
4 D		 Full name of contributor)	7 Amount of Contribution (\$)	\$1,000.00
8 Pr	rincipal occu	Hidalgo, TX 78557 pation / Job title (See Instructions)	9 Employer (See Instructions))	
		Food Broker			
	ate 5/27/2016	Full name of contributor out-of-state PAC (ID#:_ Yanez, Santos Contributor address; City; State; Zip Code 21850 Ed Carey Dr		Amount of Contribution (\$)	\$100.00
	rincipal occu omemaker	Harlingen, TX 78552 pation / Job title (See Instructions)	Employer (See Instructions)		

SCHEDULE F1

AdvertisIng Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Foot/Beverage Expense Git/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
OTHER (enter a category not listed above)

	Constitutions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Memorials E: Legal Services The Instruction Guid	xpense		xpens Vages	e /Contract Labor	Travel Out of Distr OTHER (enter a c	ict ategory not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
_	Sch: 1/7 Rpt: 7/13		Sanchez, D	aniel						
4	Date	5	Payee name							
	05/23/2016		Camperos C	Grill & Bar						s =====
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode			
	\$50.79		2500 N. Exp	pressway						
_			Brownsville,	TX 78520						
8	PURPOSE OF	(a)		e Categories listed at the	top of this sche	edule)	(b)	Description		-t- Odradula T
	EXPENDITURE		Food/Bever	age Expense				<u> </u>	outside of Texas. Compl , TX, officeholder living e	
								Meeting	,	
								-		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice sou	ight		Office hel	d
	expenditure to benefit C/OF	H								
	Date		Payee name		 					
	05/26/2016		Chik Fil A							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode			
	\$194.20		2370 N Exp	ressway STE 13	48					
			Brownsville,	TX 78521						
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	idule)	(b)	Description		
	OF EXPENDITURE			age Expense					outside of Texas. Compl	
								Food	, TX, officeholder living e	expense
								, 004		
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	expenditure to benefit C/OF			e e			-			
_	Date	Ι	Payee name					·		
	05/26/2016		Chik Fil A		÷					
	Amount (\$)	 	Payee addres	ss; City;	State;	Zip Co	ode			
	\$32.37		2370 N Exp	ressway STE 13	48					
			Brownsville,	TX 78521						
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Food/Bever	age Expense				ш	outside of Texas. Compl , TX, officeholder living s	
								Food	I 154 officeriolder fivilità e	мропас
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice sou	ıght		Office hel	di
	expenditure to benefit C/OF	-1								

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

ement Solicitation/Fundraising Expense

Transportation Equipment & Related Expense

Travet in District

Travet Out of District

OTHER (order a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memorials Ex Legal Services The Instruction Guid			pens ages	/Contract Labor		avel Out of District HER (enter a cater	gory not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3 Fil	er ID		
	Sch: 2/7 Rpt: 8/13		Sanchez, D	aniel								
4	Date	5	Payee name									
	05/23/2016		Chuy's Cust	om Sports								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Coo	de					
	\$1,117.14		160 Stenger	r Street								
			San Benito	, TX 78586								
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Shirts			ŀ		<u> </u>		f Texas. Complete		
								Shirts	, 1A, GIII	ceholder living expe	ense	
								Oillia				
9	Complete ONLY if direct	Ц	`andidate/Offic	ceholder name		office soug	nh:			Office held		
J	expenditure to benefit C/O		andidate/Onit	cholue) lialite	O	าแคน จบนไ	31 IL			Omoe neiu		
	Doto					·						
	Date		Payee name									
	05/15/2016		Denny's	<u></u>								
	Amount (\$)		Payee addres	•	State;	Zip Coo	de					
	\$103.71		1875 N Exp	ressway								
			Brownsville,	TX 78520								
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	age Expense				<u> </u>		f Texas. Complete		
								Meeting	, IX, OHK	ceholder living expe	elis u	
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	expenditure to benefit C/OI				Ŭ		, .					
	Data		Detre =						•			
	Date 05/16/2016		Payee name Facebook									
						7:	.1					
	Amount (\$)		Payee addres	•	State;	Zip Co	16					
	\$500.63		TOUT South	California Ave								
			Palo Alto , C	A 94304								
	PURPOSE OF			e Categories listed at the	top of this sche	edule)	(b)	Description		,	out to a	
	EXPENDITURE		Advertising	Expense				<u> </u>		f Texas. Complete ceholder living expe		
								Ads	, IA, UIR	seriorder avilig expe	erio c	
												
	Complete ONLY if direct	<u> </u>	andidate/Offic	ceholder name		ffice soug	ıht			Office held		
	expenditure to benefit C/O				J	5046	y					
			···									

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	mmittee	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category							e)	
_	Credit Card Payment			The Instruction Guide	explains h	iow to co	omple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>			_		3 F	Filer ID	
	Sch: 3/7 Rpt: 9/13		Sanchez, D	aniel							
4	Date	5	Payee name								
	06/12/2016		Facebook								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode		· · · · · · · · · · · · · · · · · · ·	······································	
	\$750.01		1601 South	California Ave							
	!										
	· · · · · · · · · · · · · · · · · · ·		Palo Alto , C	CA 94304							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the top	p of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense						e of Texas. Complete Schedule T. fficeholder living expense	
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	!							7 1010			
9	Complete ONLY if direct	Щ,	andidate/Offi	iceholder name		office sou	.l uaht			Office held	
Ĺ	expenditure to benefit C/O		Automore	00110100) 110111	-						
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	05/24/2016		Facebook								
Γ	Amount (\$)	Γ	Payee addres	ss; City;	State;	Zip Co	ode				
	\$753.27		1601 South	n California Ave							
	,										
	!		Palo Alto , C	CA 94304							
	PURPOSE	(a)	Category (S	ee Categories listed at the top	of this sch∈	edule)	(b)	Description		,,,	
	OF EXPENDITURE		Advertising		F ******	,		Check if travel		of Texas, Complete Schedule T.	ļ
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<u>_</u>	The Court of the State of	上		· · · · · · · · · · · · · · · · · · ·		·**> ===				Office hold	
	Complete ONLY if direct expenditure to benefit C/Oh		Jandidate/One	iceholder name	U	office sou	agm			Office held	

	Date	1	Payee name								ļ
L	05/21/2016	<u> </u>	HEB								
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	\$41.13		2250 Boca (Chica							
	!										
İ	!		Brownsville,	, TX 78520							
Г	PURPOSE	(a)	Category (Sr	ee Categories listed at the top	p of this sche	edule)	(b)	Description			
	OF EXPENDITURE			rage Expense				_		e of Texas. Complete Schedule T.	
								Check if Austin, Snacks	, TX, a	fficeholder living expense	
ĺ	!							SHOUNS			
	On the ONLY if direct	Ļ	2-m-lidata/Offi	iceholder name		4500 001				Office held	<u> </u>
	Complete ONLY if direct expenditure to benefit C/OF		Jandidate/Oni	cenoider name	U	office sou	19m			Office tield	
<u> </u>	'										

SCHEDULE F1

Advertising Expense

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Accounting Expense Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									Travel In District Travel Out of District OTHER (enter a category no	
<u> -</u> -	T.M. 1	٦.	F11 F-54 4147 **		e evhigitis i	IOW IO CO	uhie:	e uno iviiR.		Eller ID	
¹	Total pages Schedule F1:								3	Filer ID	
L	Sch: 4/7 Rpt: 10/13		Sanchez, D	aniel							
4	Date	5	Payee name								
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6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				, , ,,
	\$36.35		2250 Boca	Chica							
		Ì									
		ŀ	Brownsville	, TX 78520							
8	PURPOSE	ļ				1	(h)	Description			· ·
ľ	OF			ee Categories listed at the age Expense	top of this sche	eduļe)	(~)		outsio	de of Texas, Complete Sched	lule T.
l	EXPENDITURE		i comperei	age Expense						officeholder living expense	
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9	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice sou	ght		,	Office held	
	expenditure to benefit C/O	+									
H	Date		Payee name								
	05/21/2016		Lara's Bake								
⊢			Payee addre		State:	Zip Co	do				
	Amount (\$)		403 W. Poli	•	State,	Zip Co	ue				
	\$32.35		403 W. POII	•							
			Harlingen, ⁻	TX 78550							
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	edule)	(b)	Description			
l	OF EXPENDITURE		Food/Bever	age Expense						te of Texas. Complete Sched	lule T,
1	·							Sweet Bread		officeholder living expense	
								Sweet Dieau	101	WOIKEIS	
L	Commission ONLY if direct	<u> </u>		ceholder name		effect cons	n h t			Office held	
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İ	Date		Payee name								
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	\$411.00		1644 Centra	al Blvd							
			Brownsville	, TX 78520							
\vdash	PURPOSE						(h)	Description			
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								After Party			
	Complete ONLY if direct		andidate/Offi	ceholder name	0	ffice sou	ght			Office held	
	expenditure to benefit C/OI	-1									
					·						
I											i

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services	Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor	Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)	Se
Ļ	·		The Instruction Guide expla	ins how to com	plete this torm.	E .	
1	Total pages Schedule F1: Sch: 5/7 Rpt: 11/13		IAME z, Daniel			3 Filer ID	
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4	Date 05/27/2016	5 Payee n Sams 0					
Ļ				7:- A1			
6	Amount (\$) \$549.84	7 Payee a 621 We	ddress; City; S est Expressway 77	tate; Zip Code	•		
		Harling	en, TX 78550				
8	PURPOSE OF EXPENDITURE		V (See Categories listed at the top of thi everage Expense	s schedule) (1	=	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OF		/Officeholder name	Office sough	nt .	Office held	
	Date	Payee n	ame				
	05/24/2016	Sams C	Club				
	Amount (\$)	Payee a	ddress; City; S	tate; Zip Cod	;		
	\$126.17	621 We	st Expressway 77				
		Harling	en, TX 78550				
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of thi everage Expense	s schedule) (I	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder flving expense or campaign walkers	
	Complete ONLY if direct expenditure to benefit C/OF		/Officeholder name	Office sough	t	Office held	
	Date	Payee n	ame		'	<u></u>	
	05/24/2016	Sams C	club				
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	\$9.72	621 We	st Expressway 77				
		Harling	en, TX 78550				
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this everage Expense	s schedule) (l		outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		/Officeholder name	Office sough	t	Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donatlons Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Food/Beverage Expense Gitt/Awards/Memorials Ex Legal Services The Instruction Civils	kpense Pri Sa	•	se s/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed a	ibove)
ļ_	Total pages Cahadula F1:	2 EUEDMAN	The Instruction Guid	ie exhiama now	ro compi	ste uns iorm.	a Flavio	
	Total pages Schedule F1: Sch: 6/7 Rpt: 12/13	Sanchez, I					3 Filer ID	
4	Date	5 Payee name	 					••
	05/15/2016	l	Brookly Pizza					
6	Amount (\$)	7 Payee addr	ess; City;	State; Zi	p Code			
	\$44.38	4201 W Bt	•	•	•			
		Harlingen,	TX 78552					
8	PURPOSE	(a) Category (See Categories listed at the	top of this schedule) (b)	Description		
	OF EXPENDITURE	Food/Beve	rage Expense				outside of Texas. Complete Schedule T.	
						Meeting	, TX, officeholder living expense	
						Meenig		
9	Complete ONLY if direct	Candidata/Of	ficeholder name	055-			Office health	
9	expenditure to benefit C/O		ncenoluer name	Offici	e sought		Office held	
	Date	Payee name	9					
	05/16/2016	The Brown	sville Herald					
	Amount (\$)	Payee addre	ess; City;	State; Zi	p Code			
	\$1,300.00	1135 E. Va	ın Buren St.					
		Brownsville	e, TX 78520					
	PURPOSE OF		See Categories listed at the t	top of this schedule	(b)	Description		
	EXPENDITURE	Advertising	Expense		İ	=	outside of Texas. Complete Schedule T.	
						Ads	, TX, officeholder living expense	
						, 100		
	Complete ONLY if direct	Candidate/Of	iceholder name	Office	sought		Office held	
	expenditure to benefit C/OF				•			
	Date	Payee name	}	, <u>, ,</u>				
	05/20/2016	•	Morning Star					
	Amount (\$)	Payee addre	ess; City;	State; Zi	Code			
	\$1,681.92	1310 S. Co	•	,				
	, , -		-					
		Harlingen,	TX 78550					
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule	(b)	Description		
	OF EXPENDITURE	Advertising				<u>—</u>	outside of Texas. Complete Schedule T.	
						_	TX, officeholder living expense	
						Ads		
	Outside ONE Will Pro-	A	- 1 11					
	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office	sought		Office held	
	and an an an an an an an an an	-						
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Award Legal Serv	erage Expense ds/Memorials Expe vices truction Guide (xpens Vages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a catego	ory not listed above)
1	Total pages Schedule F1:	2	FILER NAME	Ξ						3	Filer ID	· · · · · · · · · · · · · · · · · · ·
	Sch: 7/7 Rpt: 13/13		Sanchez, D									
4	Date	5	Payee name		.= <u>=</u>					<u> </u>	·······························	
	05/16/2016	ľ	USPS									
_		_			Dit	04-1	710					. .
6	Amount (\$)	ľ	Payee addre		City;	State;	Zip Co	ae				
	\$3,660.07		West 1st St	reet								
			Harlingen, ⁻	TX 7855	50							
8	PURPOSE	(a)	Category (S	ee Categori	ies listed at the top	of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Advertising						<u></u>		de of Texas. Complete S	
									Check if Austin	ı, TX,	officeholder living exper	ase
									Manout			
Ļ	0	L,					r=				05. 1.11	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	cenolder	r name	OI	ffice sou	gnt			Office held	
	Date		Payee name									
	05/18/2016		Whataburge	er								
	Amount (\$)		Payee addre	ss; (City;	State;	Zip Co	de				
	\$13.02		1605 West	Harriso	n							
			Harlingen,	TX 7855	50							
	PURPOSE	(a)	Category (s.	oo Categori	es listed at the top	of this cohor	dulo)	(b)	Description			
	OF EXPENDITURE	ľ.	Food/Bever			OI tiles Sched	uule)	. ,	`	outsi	de of Texas. Complete S	Schedule T.
	EXPENDITURE			J ,					ii	, TX,	officeholder living exper	ise
									Food			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi	ceholder	name	Of	ffice sou	ght			Office held	
	experimiture to benefit C/Or	1										
	Date		Payee name									
	05/18/2016		Whataburge	er								
	Amount (\$)		Payee addre	ss; C	City;	State;	Zip Co	de				
	\$51.17		1605 West	Harrisor	1							
			Harlingen, 1	ΓX 7855	60							
_	PURPOSE	_						/h)	Description			
	OF		Food/Bever		es listed at the top	of this sched	dule)	(10)	:	outsi	de of Texas. Complete S	chedule T.
	EXPENDITURE		roou/bever	aye Ex	Jeilse				=		officeholder living expen	
									Food			
	Complete ONLY if direct		andidate/Offi	ceholder	name	Of	fice sou	ght			Office held	· · · · · · · · · · · · · · · · · · ·
	expenditure to benefit C/OI	4										