# Benjamin Euresti Jr.

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Comm 0001997)	•	2 Total pages	filed: 30
3 CANDIDATE/	MS/MRS/MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Benjamin			Date Received	USE ONLY  ALLY FILED
	244441812414181414144444444444444444444	14 P4 V   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P   E P	***************************************		A single annual recommendation of the CAS	
	NICKNAME	LAST		SUFFIX	01/12/2017	
		Euresti		Jr.		
4 CANDIDATE/	ADDRESS / PO BOX; APT	'/SUITE#; CIT	ΓY;	ZIP CODE	Date Hand-delivered	or Date Postmarked ERON COUNTY
OFFICEHOLDER MAILING ADDRESS	974 E. Harrison				Receipt # VOTEF	NT OF ELECTIONS & REALISM ATION
Change of Address	Brownsville, TX 78520				Date Processed	
					Date Imaged	Total
5 CAMPAIGN	MS/MRS/MR	FIRST		·····	MI	
TREASURER NAME	Mrs.	Berlinda			•••• •••••••	
	MANAGEMENT AND				SUFFIX	
	NICKNAME	LAST			SUPPIX	
		Euresti				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AF	PT / SUITE #; CIT	ry; si	TATE; ZIP CODE
TREASURER ADDRESS	32364 San Carlos Rd.					
(Residence or Business)	Los Fresnos, TX 78566					i jaje
	Los Freshos, TA 70500				•	
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER PHONE	(956) 592-0236	,,,,,,,,,				
e DEPORT	<u> </u>					
8 REPORT TYPE	X January 15	30th day befor	re election	Runoff	appointment (o	ampaign treasurer fficeholder only)
	July 15	8th day before	election	Exceeded \$500 limit	Final Report (A	ttach C/OH-FR)
9 PERIOD	Month Day Year	" "	· · · · · · · · · · · · · · · · · · ·	Month Da	ay Year	· · · · · · · · · · · · · · · · · · ·
COVERED	07/01/2016	т	HROUGH	12/31/2	· ·	
10 ELECTION	ELECTION DATE			ELECTION TYPE		· · · · · · · · · · · · · · · · · · ·
	Month Day Year		Primary	Runoff	Other	
	11/04/2014		-		L	
		X	General	Special		
						**************************************
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUG	HT (if known)	
	District Judge District 107	7 Cameron		District Judge		
		/ -			•	
						· .
		GO	TO PAGE 2			

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 30

Euresti Jr., Benjamin	(The Honorable)	14 Filer ID	(Ethics Commission Filers)
	:	00019971	(Eurics Commission Filers)
candidate / officeholder.	These expenditures may have been made withou	ut the candidate's or offi	ceholder's knowledge or
COMMITTEE TYPE	COMMITTEE NAME		
GENERAL			
	COMMITTEE ADDRESS		
SPECIFIC			
	COMMITTEE CAMPAIGN TREASURER NAME		· · · · · · · · · · · · · · · · · · ·
	COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
1. TOTAL POLITIC	I	R THAN PLEDGES,	\$ 0.00
		MC)	\$ 0.00
			\$ 0.00
4. TOTAL POLIT	ICAL EXPENDITURES		\$ 5,712.19
		LAST DAY OF THE	\$ 2,229.62
6. TOTAL PRINCIP	PAL AMOUNT OF ALL OUTSTANDING LOANS	AS OF THE LAST DAY	\$ 0.00
OF THE REPOR	TING PERIOD		Ψ 0.00
	true and correct and include:	s all information require	
MARIA G CORTINA Notary Public, State of Texas My Commission Expires 02-05-2019	Signature		
TARY STAMP / SEAL AB		7 - TX-1006540	12
		, this the	12th day
			· .
3	CANDITTEE TYPE  GENERAL  GENERAL  SPECIFIC  1. TOTAL POLITIC LOANS, OR GU, OTHER THAN  3. TOTAL POLITIC REPORTING PE  6. TOTAL PRINCIP OF THE REPORTING PE  6. TOTAL PRINCIP OF THE REPORTING PE  7. TOTAL POLITIC REPORTING PE  8. TOTAL PRINCIP OF THE REPORTING PE  9. TOTAL PRINCIP OF THE REPORTING PE  1. TOTAL POLITIC REPORTING PE  2. TOTAL POLITIC REPORTING PE  3. TOTAL POLITIC REPORTING PE  4. TOTAL POLITIC REPORTING PE  5. TOTAL POLITIC REPORTING PE  5. TOTAL POLITIC REPORTING PE  6. TOTAL POLITIC REPORTING PE  1. TOTAL POLITIC REPORTING PE  1. TOTAL POLITIC REPORTING PE  2. TOTAL POLITIC REPORTING PE  3. TOTAL POLITIC REPORTING PE  4. TOTAL POLITIC REPORTING PE  5. TOTAL POLITIC REPORTING PE  6. TOTAL POLITIC REPORTING PE  1. TOTAL	candidate / officeholder. These expenditures may have been made without consent. Candidates and officeholders are required to report this informated to consent. Candidates and officeholders are required to report this informated to committee the committee the committee to committee the com	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTE

### **SUBTOTALS - JC/OH**

# FORM JC/OH COVER SHEET PG 3

3 of 30

8 FILER NAME Euresti Jr., B	(Ethics Commission Filers)		
20 SCHEDULE S NAME OF SCI	SUBTOTAL AMOUNT		
1. S	<b>\$</b>		
2. S	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. 🔲 S	CHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4. 🔲 S	CHEDULE E(J): LOANS (JUDICIAL)		\$
5. X S	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	<b>\$</b> 5,712.19
6. 🗍 S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. 🗌 S	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION		\$
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I O FILER	RETURNED	<b>\$</b> 1,221.76

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
ī	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/26 Rpt: 4/30	Euresti Jr., Benjamin (The Honorable) 00019971
1	Date	5 Payee name
	09/11/2016	Academy
3	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	4305 Highway 77
	•	
		Brownsville, TX 78520
3	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Birthday gift for staff
}	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	12/10/2016	Big Lots
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.82	1601 East Price Road
		Brownsville, TX 78521
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	LA LIBITORIL	Check If Austin, TX, officeholder living expense  Christmas gifts for staff
		Officialities gifts for stein
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Davison
	08/17/2016	Payee name Brownsville Independent School District Athletic Dept.
	Amount (\$) \$60.00	Payee address; City; State; Zip Code  1 Boulevard of Champions
	\$00.00	1 Boulevalu of Champions
		Business #11- TV 70504
_	ł <sub>i</sub>	Brownsville, TX 78521
	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
		Fundraiser
		,
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

	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: 2/26 Rpt: 5/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	12/13/2016	Cameron County	
6	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1100 East Monroe Street Suite 218 Brownsville, TX 78520	
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Aus	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense pioyees dinner/dance
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/13/2016	Cameron County Juvenile Justice Dept DBH	
	Amount (\$) \$30.00	Payee address; City; State; Zip Code 2310 West Highway 77	
		San Benito, TX 78586	e de la companya de La companya de la co
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Check if Aus	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense presents for after-school children
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/16/2016	Payee name Cameron County Women's Law	44
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 103 E. Price Road Suite B Brownsville, TX 78521	
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Or Students
<u>Г</u>	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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 now to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/26 Rpt: 6/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	08/10/2016	Cantu, Irma Jean	
6	Amount (\$)	7 Payee address; City; State; Zip Code	•
	\$50.00	794 Paredes Line Road	
		Brownsville, TX 78520	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T.
	LAI ENDITORE		n, TX, officeholder living expense on BHS Class of 1967
		Class Reuni	JII BH3 Class of 1907
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
7	expenditure to benefit C/OI	Candidate/Officerolder name Office sought	Since field
_	Data	Davis	
	Date 12/02/2016	Payee name Cheddar's Restaurant	
	Amount (\$) \$101.46	Payee address; City; State; Zip Code 2495 Highway 83	
	Φ101.40	2490 Fighway os	
		Brownsville, TX 78520	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  [b] Description  [c] Check if trave	l outside of Texas, Complete Schedule T,
	EXPENDITURE	1 Ood/Develage Expense	in, TX, officeholder living expense
		Hanna High	School Dance Team
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/02/2016	Cheddar's Restaurant	
	Amount (\$)	Payee address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
	\$56.56	2495 Highway 83	•
		Brownsville, TX 78520	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	<del></del>
	OF	Food/Beverage Expense Check if trave	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austi	in, TX, officeholder living expense
		Hanna High	School Dance Team
1	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	experientare to benefit eye		
			•

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/26 Rpt: 7/30	Euresti Jr., Benjamin (The Honorable)	00019971
4 Date	5 Payee name	
09/06/2016	Cheddars Restaurant	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$82.78	2495 Highway 83 North	
	Brownsville, TX 78520	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EVEN NOT UP TO	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T,
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Staff luncheon
		0.00
<ul> <li>Complete ONLY if direct expenditure to benefit C/O</li> </ul>	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
09/09/2016	Cici's Pizza #336	
Amount (\$)	Payee address; City; State; Zip Code	
\$12.97	4101 Five Points Road	
	Suite N5	
	Corpus Christi, TX 78410	
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.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Judicial Conference from September 6-9, 2016, in San Antonio, Texas
0 1 0 0 0 0 0 0	0.51.10%	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
•		
Date	Payee name	
10/29/2016	Cuevas, Blanca	
Amount (\$)	Payee address; City; State; Zip Code	
\$100.00	35243 F.M. 1421	
	Los Fresnos, TX 78586	
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.
LA LIBITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Funeral expenses
0	Constitute (Office believe and office and of	Office I II
Complete ONLY if direct expenditure to benefit C/O	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
Credit Card Payment

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

	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: 5/26 Rpt: 8/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	09/06/2016	Dance Infinity Academy	<u></u>
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	275 Kings Highway	·
		Brownsville, TX 78520	<u> </u>
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	el outside of Texas. Complete Schedule T. In, TX, officeholder living expense
			ın, 1x, ancendaer iwing expense Iram advertisement
	İ	Janes Hog	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ĺ	expenditure to benefit C/OF		
_	Date	Payee name	
	12/01/2016	Dance Infinity Academy	
	Amount (\$)	Payee address; City; State; Zip Code	
1	\$230.00	275 Kings Highway	
	<del>4230.00</del>		
	İ	Brownsville, TX 78520	<u> </u>
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	el outside of Texas. Compiete Schedule T. tin, TX, officeholder living expense
	İ	! ·	un, 1x, amcendiaer living expense advertisement in program
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	н	
-	Date	Payee name	
	08/10/2016	Dick's Sporting Goods	:
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	2370 N. Expressway 83	
	İ	Brownsville, TX 78520	
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aust	tin, TX, officeholder living expense
	I	Birthday gift	t for Staff
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			
ĺ			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Travel in District Consulting Expense Polling Expense Travel Out of District
OTHER (enter a category not listed above) Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services 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) 00019971 Sch: 6/26 Rpt: 9/30 Euresti Jr., Benjamin (The Honorable) Date Payee name 09/11/2016 Dillard's 6 Amount (\$) Payee address; City; State; Zip Code \$50.00 2340 North Expressway 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. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Birthday gift for staff Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/11/2016 **Gateway Printing Office** Amount (\$) Payee address; City; State; Zip Code \$16.80 1460 N. Expressway 77 Brownsville, TX 78521 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee School supplies Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/25/2016 **Gateway Printing Office** Amount (\$) Payee address; City; State; Zip Code \$41.94 1460 N. Expressway 77 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. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Materials for Los Fresnos United High School Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/26 Rpt: 10/30	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	07/03/2016	Good Shepherd Community Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.00	300 Morrison
		Brownsville, TX 78520
8	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
İ		Church donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>ብ</b> ተታለፉ
┢	Date	Payee name
	07/17/2016	Good Shepherd Community Church
<b>—</b>	Amount (\$)	Payee address; City; State; Zip Code
1	\$50.00	300 Morrison
		Brownsville, TX 78520
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Church donation
Т	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	07/31/2016	Good Shepherd Community Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	300 Morrison
		Brownsville, TX 78520
	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.
		Candidate/Officeholder/Political Committee Church donation
<b>—</b>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
H		

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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: 8/26 Rpt: 11/30 Date Payee name **Good Shepherd Community Church** 08/06/2016 Payee address; State: Zip Code City: Amount (\$) \$50.00 300 Morrison 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 Church donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/14/2016 Good Shepherd Community Church City; State; Zip Code Amount (\$) Payee address; \$50.00 300 Morrison 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 Church donation Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/25/2016 Good Shepherd Community Church Payee address; Amount (\$) City: State; Zip Code \$50.00 300 Morrison 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 Church donation Office sought Candidate/Officeholder name Office held 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 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.

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1	Total pages Schedule F1:	2	FILER NAME	_	_	3 Filer ID (Ethic	s Commissio	on Filers)
	Sch: 9/26 Rpt: 12/30		Euresti Jr., Benjamin (The Honorable	<del>?</del> )		00019971		100
4	Date	5	Payee name					
ĺ	09/11/2016	1	Good Shepherd Community Church			en en en en en en en en en en en en en e		
<u>_</u>				tor 71- C	de-			
6	**	1	•	te; Zip Cod	ue			
ĺ	\$50.00		300 Morrison					
	İ					•		
			Brownsville, TX 78520		_			<u> </u>
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By			Check if travel outside of Texas. Complete Sch		
			Candidate/Officeholder/Political Com	nmittee		Church denotion	e	• .
ĺ	ì			1		Church donation		
9	Complete ONLY if direct expenditure to benefit C/Oi		andidate/Officeholder name	Office sout	ght	Office held		
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	Date		Payee name					
	09/18/2016		Good Shepherd Community Church					
<del> </del>	Amount (\$)	T	Payee address; City; Stat	ite; Zip Co	de		•••	
1	\$50.00		300 Morrison	,				5
	+55,000							
ĺ	i	1	Brownsville, TX 78520					
<u> </u>		_			<i></i>			
	PURPOSE	1(2)	Category (See Categories listed at the top of this s	bradestes	(h)	Description		
		(a)		scriednie)	(10)		hadule T	
	OF EXPENDITURE	(a)	Contributions/Donations Made By		(,	Check if travel outside of Texas. Complete Sci		
	OF	(a)			(,			
	OF	(a)	Contributions/Donations Made By		(,	Check if travel outside of Texas. Complete Sci		
	OF EXPENDITURE	-	Contributions/Donations Made By Candidate/Officeholder/Political Com	nmittee		Check if travel outside of Texas. Complete Sci		
	OF		Contributions/Donations Made By			Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name	nmittee		Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Of		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Payee name	office sou		Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		1
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/O		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Good Shepherd Community Church	omittee	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Of		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Good Shepherd Community Church	office sou	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Ol  Date 10/16/2016		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name Payee name Good Shepherd Community Church	omittee	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Of Date 10/16/2016  Amount (\$)		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat	omittee	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Of Date 10/16/2016  Amount (\$)		Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat	omittee	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OI  Date 10/16/2016  Amount (\$)  \$50.00	OH T	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat 300 Morrison  Brownsville, TX 78520	Office sou	ght	Check if travel outside of Texas. Complete Sci		
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OI  Date 10/16/2016  Amount (\$)  \$50.00	OH T	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; State 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this see	Office sou	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation	·	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OI  Date 10/16/2016  Amount (\$)  \$50.00	OH T	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat 300 Morrison  Brownsville, TX 78520	Office sour	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation  Office held  Description	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OI  Date 10/16/2016  Amount (\$)  \$50.00	OH T	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By	Office sour	ght	Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation  Office held  Description Check if travel outside of Texas. Complete Sci	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OI  Date 10/16/2016  Amount (\$)  \$50.00	OH T	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By	Office sour	ght	Check if travel outside of Texas. Complete Sci Church donation  Office held  Description Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Oi  Date 10/16/2016  Amount (\$)  \$50.00  PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; Stat 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By	Office sour	ght (b)	Check if travel outside of Texas. Complete Sci Church donation  Office held  Description Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Off  Date 10/16/2016  Amount (\$)  \$50.00  PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; State 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By Candidate/Officeholder/Political Com	Office sour	ght (b)	Check if travel outside of Texas. Complete Sci Church donation  Office held  Description Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Oi  Date 10/16/2016  Amount (\$)  \$50.00  PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; State 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By Candidate/Officeholder/Political Com	Office sour	ght (b)	Check if travel outside of Texas. Complete Sci Church donation  Office held  Description Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation	e hedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Oi  Date 10/16/2016  Amount (\$)  \$50.00  PURPOSE OF EXPENDITURE	(a)	Contributions/Donations Made By Candidate/Officeholder/Political Com Candidate/Officeholder name  Candidate/Officeholder name  Payee name Good Shepherd Community Church Payee address; City; State 300 Morrison  Brownsville, TX 78520  Category (See Categories listed at the top of this s Contributions/Donations Made By Candidate/Officeholder/Political Com	Office sour	ght (b)	Check if travel outside of Texas. Complete Sci Church donation  Office held  Description Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Church donation	e hedule T.	

#### SCHEDULE F1

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Luan 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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/26 Rpt: 13/30	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	12/11/2016	Good Shepherd Community Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	300 Morrison
		Brownsville, TX 78520
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	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/O	
H	Date	Payee name
	09/10/2016	H.E.B. #291
_	Amount (\$)	Payee address; City; State; Zip Code
1	\$121,55	613 S. Expressway 77/83
	422,00	
		Harlingen, TX 78550
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Barbecue gathering for voters
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	10/21/2016	H.E.B. #446
⊢		
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 2155 Paredes Line Road
	φυθ.00	2100   alcaes Lille Nodu
		Brownsville, TX 78521
一	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVBENDITUBE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gift card for staff
L		
1	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experience to beliefit C/O	
1		

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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: 11/26 Rpt: 14/30	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	12/17/2016	Hinojosa, Thomas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	4826 Orchid Street
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	h-/11 h-110/11	Check if Austin, TX, officeholder living expense  Graduation gift
	!	Oraciación gin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
y	expenditure to benefit C/O	Odrididator Officialistic Trains
<u></u>		
	Date	Payee name
	09/03/2016	Hobby Lobby City Chata Tip Code
,	Amount (\$)	Payee address; City; State; Zip Code
	\$132.24	2209 W. Lincoln Street
	!	
		Harlingen, TX 78552
	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
		Materials for Los Fresnos United High School
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>H</b>
F	Date	Payee name
	09/16/2016	Immaculate Conception Cathedral
H	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	1218 E. Jefferson Street
		Brownsville, TX 78520
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Construction costs
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiulture to benefit or o	
l		

#### 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

Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Solicitation/Fundraising Expense

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: 12/26 Rpt: 15/30 Euresti Jr., Benjamin (The Honorable) 4 ... Date Payee name J.C. Penney 11/28/2016 6 Amount (\$) Payee address; State; Zip Code \$50.00 2370 N. Expressway 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 Birthday gift for staff Office sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/12/2016 J.W. Marriott State; Zip Code Amount (\$) Payee address; City; \$804.75 23808 Resort Parkway San Antonio, TX 78261 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Hotel **EXPENDITURE** Check if Austin, TX, officeholder living expense Judicial Conference from September 6-9, 2016, in San Antonio, Texas Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/15/2016 Jones Liquor City; State; Zip Code Amount (\$) Payee address; \$40.04 800 E. Alton Gloor Brownsviile, TX 78526 **PURPOSE** (b) Description (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 Los Fresnos United High School employee gathering Candidate/Officeholder name Office sought Office held 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 Core Bennant

Event Expense Fees Food/Beverage Expense GitVAwards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) Total pages Schedule F1: 2 FILER NAME Filer ID Euresti Jr., Benjamin (The Honorable) 00019971 Sch: 13/26 Rpt: 16/30 Date Payee name 09/10/2016 Julia's Restaurant Payee address: City: State; Zip Code Amount (\$) \$30.82 220 W. Ocean Boulevard Los Fresnos, TX 78566 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Luncheon with constituents Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/03/2016 Kohnami Restaurant Payee address; State: Zip Code Amount (\$) \$269.67 410 Padre Boulevard Suite O South Padre Island, TX 78597 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner meeting with constituents Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/05/2016 Longhorn Cattle Co. Amount (\$) Payee address; City; State; Zip Code \$83.18 3055 W. Expressway 83 San Benito, TX 78586 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 Luncheon meeting with constituents Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

### SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Solicitation/Fundraising Expense

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: 14/26 Rpt: 17/30 Euresti Jr., Benjamin (The Honorable) Date Payee name 08/24/2016 Lopez, Joe Payee address; State; Zip Code Amount (\$) City; \$35.00 7517 Boca Chica Boulevard 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. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Barbecue tickets Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/17/2016 Los Fresnos Girls Bastetball Amount (\$) Payee address; City: State; Zip Code \$36.00 907 N. Arroyo Boulevard 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. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Fundraiser Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 09/12/2016 Los Fresnos High School Amount (\$) Payee address; City: State; Zip Code \$42.00 907 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 **Fundraiser** Office held Complete ONLY if direct Candidate/Officeholder name Office sought 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 Payment

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
L Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/26 Rpt: 18/30	Euresti Jr., Benjamin (The Honorable)	00019971
Date	5 Payee name	
12/01/2016	Los Fresnos High School Band	
Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$20.00	907 N. Arroyo Boulevard	
	Los Fresnos, TX 78566	
B PURPOSE	(a) Category (See Categories ilsted at the top of this schedule)	(b) Description
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Fundraiser
		1 unulusei
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O		Sinot held
D-4-	Γ	
Date	Payee name Los Fresnos Mariachi Band	
11/02/2016		
Amount (\$)	Payee address; City; State; Zip Cod	ge
\$35.00	907 N. Arroyo Boulevard	
	7000	
	Los Fresnos, TX 78566	
PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeriolderi/ Officer Committee	School donation
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	Н	er en en en en en en en en en en en en en
Date	Payee name	
08/24/2016	Los Fresnos United Valley	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$29.00	33790 F.M. 803	
	Los Fresnos, TX 78566	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Fundraiser
Complete ONLY if direct	Candidate/Officeholder name Office soug	oht Office held
expenditure to benefit C/O	П	
,		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Food/Beverage Expense Gift/Awards/Memoriais 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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/26 Rpt: 19/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
-	12/19/2016	Lozano, Giovane	
6		7 Payee address; City; State; Zip Code	
0	Amount (\$) \$100.00	9360 Los Olmos	
	\$100.00	9300 LOS ORITOS	
		Los Fresnos, TX 78566	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations wade by	i outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Light Check if Austin Committee Funeral expe	- · · · · · · · · · · · · · · · · · · ·
		T SINGUI SAPA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
٦	expenditure to benefit C/OI		Omoo noid
_			
	Date	Payee name	
L	09/04/2016	Martinez, Fernando	
	Amount (\$)	Payee address; City; State; Zip Code	£ 150
	\$100.00	6222 Pecos River	
l		Brownsville, TX 78520	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Contributions/Donations Made By	loutside of Texas. Complete Schedule T.
	EXPENDITURE		n, TX, officeholder living expense
		Funeral exp	enses
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
L	Oxportate to Bottone Gro		
	Date	Payee name	
	11/15/2016	Martinez, Marbelia	
	Amount (\$)	Payee address; City; State; Zip Code	
1	\$150.00	1736 Carnation Drive	
		Brownsville, TX 78526	
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		l outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austi	in, TX, officeholder living expense
		Staff Christn	nas card
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
1	expenditure to benefit C/O	Н	
		thice Commission	Version V1 0 2016

## 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 Ex

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	l Committee	Description of the Instruction Guide explains how to complete this form:								
1	Total pages Schedule F1:	2 FILER NAM	=				3	Filer ID	(Ethics Commi	ssion Fil	ers)
	Sch: 17/26 Rpt: 20/30		Benjamin (The Ho	onorable)				00019971	·		
4	Date	5 Payee name	;								
	11/29/2016	Oyster Bar						, t			
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode						
	\$21.35	1057 East	Levee Street								
		Brownsville	e, TX 78520								
8	PURPOSE	(a) Category (s	See Categories listed at the	top of this schedule)	(b)	Description	÷				
	OF EXPENDITURE	Contributio	ns/Donations Mad	е Ву		<b>-</b>			nplete Schedule T.		
	EXI ENDITORS	Candidate/	Officeholder/Politic	cal Committee	ļ	Luncheon wit		, officeholder livin	g expense	٠.٠	•
						Luncheon wi	ui S	ildii			
					<u> </u>			- mri 1			11.7
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ught			Office h	ieia		
L	oxpenditure to belieft 0/01								<u> </u>		1 11
	Date	Payee name	3								
	10/13/2016	Pirate's La	nding						<u> </u>		
_	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode						
1	\$106.79	110 N. Ga	rcia Street					•			
								4			
		Port Isabe	, TX 78578				:.			٠.	
	PURPOSE	(a) Category	See Categories listed at the	top of this schedule)	(b)	Description		· · · · · · · · · · · · · · · · · · ·			
	OF	1	rage Expense	,	1				mplete Schedule T.		
	EXPENDITURE							, officeholder livin	ng expense	•	
						Dinner with o	con	situents			
L								· · ·		*.	
l	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office h	neld		
L	experience to benefit 6/6						٠.				
	Date	Payee nam	е					. •			
ļ	12/17/2016	Primera Ig	lesia Presbiteriana	l						٠.	
Г	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode						
	\$50.00	616 E. Jef	ferson								
l		Brownsvill	e, TX 78520								
┢	PURPOSE	(a) Category	See Categories listed at the	top of this schedule)	(b)	Description					
l	OF	1	ons/Donations Mac				l outs	ide of Texas. Co	mplete Schedule T.		
l	EXPENDITURE	Candidate	/Officeholder/Politi	cal Committee		L		t, officeholder livir	ng expense		
						Church dona	atio	n			
L									<u> </u>		* _ A * _
	Complete ONLY if direct		ficeholder name	Office so	ught			Office I	neld		
Ĺ	expenditure to benefit C/O	Π									
Γ											
1											•

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Office Overhead/Rental Expense Polling Expense Printing Expense

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

Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME 3 Filer ID (Ethics Commission Filers) Total pages Schedule F1: 2 00019971 Sch: 18/26 Rpt: 21/30 Euresti Jr., Benjamin (The Honorable) Date Payee name 07/30/2016 Saltgrass Steakhouse State: Zip Code Amount (\$) Payee address; City: \$188,87 3000 W. Expressway 83 McAllen, TX 78501 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner meeting with constituents Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 08/28/2016 Sam's Club #8126 Payee address; City; State; Zip Code Amount (\$) \$68.34 3570 West Alton Gloor Road 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 Food for the All American Dance Team Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/08/2016 Sam's Club #8126 Amount (\$) Payee address; City; State; Zip Code \$27.06 3570 West Alton Gloor Road 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. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Christmas card Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

#### SCHEDULE F1

Solicitation/Fundraising Expense

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officent
Code Code Reviews

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

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

head/Rental Expense Transportation Equipment & Related Expense ense Travel in District OTHER (enter a category not listed above)

Legal Services Salaries/Wages/Contract Labor 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 Filer ID Sch: 19/26 Rpt: 22/30 Euresti Jr., Benjamin (The Honorable) 00019971 Date Payee name 09/08/2016 **Shell Corner Store** Payee address; State; Zip Code Amount (\$) City: \$38.29 8730 Interstate Highway 35 San Antonio, TX 78240 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Gasoline **EXPENDITURE** Check if Austin, TX, officeholder living expense Judicial Conference from September 6-9, 2016, in San Antonio, Texas Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Pavee name 10/28/2016 Stagemann, Cynthia Amount (\$) Payee address; State; Zip Code \$75.00 9600 Lake Concordia Ct. 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. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift for baby shower Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 10/13/2016 Staples Office Supplies Amount (\$) Payee address; City: State; Zip Code \$40.60 2436 Pablo Kisel Boulevard Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Supplies **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gitt/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 complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/26 Rpt: 23/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	09/08/2016	Stripes Gas #9112	* *
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$19.14	1826 W. Tyler Avenue	
		Harlingen, TX 78550	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
	OF EXPENDITURE	Gasoline	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
			al Conference from September 6-9, 2016, in
		San A	ntonio, Texas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	<del>'</del>	
_	Date	Payee name	
	09/09/2016	Stripes Gas Station #2124	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.16	3955 U.S. Highway 77	
		Corpus Christi, TX 78410	
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ption
	OF EXPENDITURE	Gasoline	ck if travel outside of Texas, Complete Schedule T.
		ı	ck if Austin, TX, officeholder living expense al Conference from September 6-9, 2016, in
			ntonio, Texas
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	10/31/2016	Sunshine Haven	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	7105 W. Lakeside Boulevard	
			·
		Olmito, TX 78575	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ption
	OF EXPENDITURE	Contributions/Donations Made By	ck if travel outside of Texas. Complete Schedule T.
	EM EMBITORE		ck if Austin, TX, officeholder living expense tion for hospice care
		Donat	non to hoopide dute
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
			Omoo noid
	expenditure to benefit C/O	Ħ	,
_	expenditure to benefit C/O	<b>T</b>	
	expenditure to benefit C/O		· · · · · · · · · · · · · · · · · · ·

## SCHEDULE F1

Advertising Expense
Accounting/Sanking
Consulting Expense
Contributions/ Donations Made By Candridate/Officeholder/Political Committee

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

Loan Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 21/26 Rpt: 24/30	Euresti Jr., Benjamin (The Honorable)	00019971
4	Date	5 Payee name	
	07/10/2016	Texas Democratic Party	:
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.00	707 Rio Grande Street	
		Austin, TX 78701	
8	PURPOSE		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
			Democratic Party contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
┢	Date	Payee name	
l	08/14/2016	Texas Democratic Party	
`	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	707 Rio Grande Street	
		Austin, TX 78701	
Г	PURPOSE OF		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
			Democratic Party contribution
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/O		<u> </u>
	Date	Payee name	
	09/15/2016	Texas Democratic Party	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	707 Rio Grande Street	·
l			
		Austin, TX 78701	
	PURPOSE OF	, (555 5)	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
			Democratic Party contribution
۲	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	H	<u> </u>
Г			
l			

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/26 Rpt: 25/30	Euresti Jr., Benjamin (The Honorable) 00019971
4	Date	5 Payee name
	10/28/2016	Texas Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	707 Rio Grande Street
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Democratic Party Contribution
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	,	
	Date	Payee name
	11/10/2016	Texas Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	707 Rio Grande Street
	•	
		Austin, TX 78701
	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.
		Candidate/Officeholder/Political Committee
		Democration any contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
	12/10/2016	Texas Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	707 Rio Grande Street
		Austin, TX 78701
	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.
		Candidate/Officeholder/Political Committee
		Democratic Party contribution
<u></u>	Complete ONLY 15 -2	Candidate/Officeholder name Office paright
1	Complete ONLY if direct expenditure to benefit C/O	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 Co

Event Expense Loan Repayment/Reimbursement Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Office Overhead/Rental Expense
Polling Expense
Frinting Expense
Salarles/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp			ibove)
1	Total pages Schedule F1:	<u> </u>		3 Filer ID (Ethics Commis	sion Filers)
	Sch: 23/26 Rpt: 26/30	Euresti Jr., Benjamin (The Honorable)		00019971	
4	Date	5 Payee name			
	09/07/2016	Texas Hamburger Co.		• .	
6	Amount (\$)	7 Payee address; City; State; Zip Code	;		
	\$35.30	9010 Huebner Road			
		San Antonio, TX 78240			+ 1 m
8	PURPOSE		)	Description	
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense	1
			1	Judicial Conference from September 6-9,	2016. in
				San Antonio, Texas	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	ıt	Office held	
	expenditure to benefit C/O	<del>1</del>			14 1 25
	Date	Payee name			
	12/21/2016	Texas Roadhouse		and the state of the	7 23.
	Amount (\$)	Payee address; City; State; Zip Code	<del>-</del>	*	
f	\$50.00	3400 N. Expressway			
		Brownsville, TX 78520			
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	)	Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.	4
i				Check if Austin, TX, officeholder living expense  Gift card for Judge Trejo	
				on cara ist caage riejs	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	t	Office held	
	expenditure to benefit C/O				
-	Date	Payee name			
	10/08/2016	Torres, Santiago			
	Amount (\$)	Payee address; City; State; Zip Code	<u>,</u>		
	\$100.00	434 Woodhaven Street			
		Brownsville, TX 78520			
-	PURPOSE		) )	Description	<u> </u>
	OF EXPENDITURE	Gift/Awards/Memorials Expense	•	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	·		Check if Austin, TX, officeholder living expense	
				Gift for 50th wedding anniversary	
L	Complete ONLY ! dive ch	Candidate/Officeholder name		Office held	
1	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	ΙĹ	Office held	*
<u> </u>	-				

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Madé 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

	Candidate/Officeholder/Politica Credit Card Payment	i Committee	Legal Services The Instruction Gu	Salaries/ ide explains how to c		CONTRACT LABOR OTHER (enter a category not listed about this form.	ove)
1	Total pages Schedule F1:	2 FILER NAMI				3 Filer ID (Ethics Commissi	ion Filers)
	Sch: 24/26 Rpt: 27/30		– Benjamin (The H	ionorable)		00019971	
4	Date	5 Payee name	!				
	08/09/2016	Vermillion					· .
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode		
	\$56.61	115 Parede	es Line Road				=" _
		Brownsville	e, TX 78520				1.45
8	PURPOSE OF		ee Categories listed at th	ne top of this schedule)	(b)	Description	
	EXPENDITURE	Food/Beve	rage Expense			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
						Meal for Los Fresnos teachers	
						en en en en en en en en en en en en en e	
9	Complete ONLY if direct		iceholder name	Office so	ught	Office held	
	expenditure to benefit C/O						
	Date	Payee name					
	08/15/2016	Vermillion				<u> </u>	
	Amount (\$)	Payee addre		State; Zip C	ode		
1	\$117.43	115 Parede	es Line Road				
							en en en en en en en en en en en en en e
L		Brownsville	e, TX 78520				
	PURPOSE OF		See Categories listed at th	ne top of this schedule)	(b)	Description  Check if travel outside of Texas, Complete Schedule T.	, the
	EXPENDITURE	Food/Beve	rage Expense			Check if travel outside of Texas, Complete Scriedule 1.  Check if Austin, TX, officeholder living expense	
						Back to school dinner for Hanna High Scho	ool
				•		students	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office so	ught	Office held	
	experiditure to beliefit C/O						<u>:</u>
	Date	Payee name	•				4
_	10/08/2016	Vermillion					
	Amount (\$)	Payee addre		State; Zip C	ode		•
	\$158.01	115 Pared	es Line Road				
			TV 70500				
L			e, TX 78520		T		
	PURPOSE OF		See Categories listed at ti	ne top of this schedule)	(b)	Description Check if travel outside of Texas, Complete Schedule T.	
	EXPENDITURE	Food/Beve	rage Expense			Check if Austin, TX, officeholder living expense	Ý.
						Luncheon with constituents	
L							<u> </u>
4	Complete ONLY if direct		ficeholder name	Office so	ught	Office held	
L	expenditure to benefit C/O	П					
L							
_							

#### 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
Lenal Services

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

	Candidate/Officeholder/Politica		Legal Services	ense Printing E Sataries/V		e /Contract Labor		OTHER (ente		ot listed abo	ove)
	Credit Card Payment	The Instruction Guide explains how to complete this form.								,	
1	Total pages Schedule F1:	2 FILER NAMI		***************************************			3	Filer ID	(Ethics (	Commissi	on Filers)
	Sch: 25/26 Rpt: 28/30	Euresti Jr.,	Benjamin (The Ho	norable)				00019971			
4	Date	5 Payee name									
•	09/05/2016	Walmart #2									
_		7 Payee addre		State; Zip Co	do.						
0	Amount (\$) \$10.44	1	ss; City; cean Boulevard	State, Zip Cu	ide						
	<b>ФТ</b> 0. <del>44</del>	1004 W. O	Jean Doulevaru								
											,
		Los Fresno	s, TX 78566								
8	PURPOSE	(a) Category (s	ee Categories listed at the to	p of this schedule)	(b)	Description					
	OF EXPENDITURE		ns/Donations Made			Check if travel			•	dule T.	
		Candidate/	Officeholder/Politic	ai Committee		Food for Los				School	
					ļ	1 000 101 203	1 10	Janua Onic	cu i ligii c	JG: IOOI	. 1.
_	Consulate ONLY is direct	C	ingle alder verse	Office cou				Office	hold		
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ignt			Office	neiu		
	Date	Payee name									
	12/15/2016	Walmart #2	2765							*	
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode						
	\$158.37	1004 W. O	cean Boulevard								
		Los Fresno	s, TX 78566							•	
	PURPOSE	(a) Category (s	ee Categories listed at the to	on of this schedule)	(b)	Description					
	OF EXPENDITURE	Contributio	ns/Donations Made	By		Check if travel			•	dule T.	
	EXPENDITORE	Candidate/	Officeholder/Politic	al Committee		Check if Austin					
						Los Fresnos	Un	itea High s	school en	npioyee	gathering
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ight			Office	held		
						VII 11 10 10 11 11 11 11 11 11 11 11 11 11					
	Date	Payee name									
	09/06/2016	Wasabi Bis	etro								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode						
	\$57.36	9921 W. In	terstate 10								
		San Antoni	o, TX 78230								
	PURPOSE	(a) Category 15	iee Categories listed at the to	on of this schedule)	(b)	Description					
	OF EXPENDITURE		rage Expense	op or uno conjugues,		Check if travel	outsi	de of Texas. C	omplete Sche	dule T.	
	EXPENDITURE		•			Check if Austin					
						Judicial Conf San Antonio,			septembe	er 6-9, 2	2016, in
						San Antonio,		, as			<u> </u>
	Complete ONLY if direct		iceholder name	Office sou	ght			Office	held		
	expenditure to benefit C/O	П 									1,04
											ý

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

Travel Out of District OTHER (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/26 Rpt: 29/30 Euresti Jr., Benjamin (The Honorable) 00019971 Date Payee name 12/12/2016 Wing Stop Amount (\$) Payee address; City; State; Zip Code \$39.49 405 East Ocean Boulevard Los Fresnos, TX 78566 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Luncheon for Los Fresnos teachers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

### SCHEDULE K

	CONTR		BUTIONS RETURNED TO FILER								
	The Instruction Guide explains how to complete this form.					1 Total pages Schedule K: Sch: 1/1 Rpt: 30/30					
2	FILER NAME			3	Filer (C	) (Eth	ics Comr	mission Filers)	٦		
	Euresti Jr., Benjamin (The Honorable)					971					
4	Date	5	Name of person from whom amount is received			8 Am	nount (\$)				
	09/23/2016		Fifth Administrative Judicial Region					\$1,221.76			
	!	6	Address of person from whom amount is received; City; State; Zip Code		***********	1					
	!		200 N. Almond Street			:					
	!										
	!	L	Alice, TX 78332						,		
	1	7	Purpose for which amount is received	oliti	cal cont	ribution	returned	to filer			
		L	Reimbursement for expenses for Judicial Conference								
		-			:				_		
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