

DANIEL

“DAN”

SANCHEZ

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|-------------------------------------|---|---------------------------------|--|---|--|---|---|--------|--------|--|-------------------|------|----------------------------------|--|--|----------------------------------|----------------------------------|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: <div style="text-align: center; font-size: 2em;">2</div> | | | | | | | | | | | | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; text-align: center;">FIRST</td> <td style="width:15%; text-align: center;">MI</td> <td style="width:35%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Mr Daniel</td> <td></td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Dan Sanchez</td> <td></td> <td></td> </tr> </table> | MS / MRS / MR | FIRST | MI | | | Mr Daniel | | | NICKNAME | LAST | SUFFIX | | | Dan Sanchez | | | OFFICE USE ONLY | | | | |
| MS / MRS / MR | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| | Mr Daniel | | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | LAST | SUFFIX | | | | | | | | | | | | | | | | | | | | |
| | Dan Sanchez | | | | | | | | | | | | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 8px;">APT / SUITE #;</td> <td style="width:25%; font-size: 8px;">CITY;</td> <td style="width:25%; font-size: 8px;">STATE; ZIP CODE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: center;">28233 Bass Blvd Harlingen Texas 78552</td> </tr> </table> | ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; ZIP CODE | | | | | 28233 Bass Blvd Harlingen Texas 78552 | | | | Date Received CAMERON COUNTY DEPARTMENT OF ELECTIONS & VOTER REGISTRATION JUL 11 2017 RECEIVED | | | | | | | | |
| ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; ZIP CODE | | | | | | | | | | | | | | | | | | | |
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| 28233 Bass Blvd Harlingen Texas 78552 | | | | | | | | | | | | | | | | | | | | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">AREA CODE</td> <td style="width:50%; font-size: 8px;">PHONE NUMBER</td> <td style="width:25%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td></td> <td style="text-align: center;">(956) 491-3283</td> <td></td> </tr> </table> | AREA CODE | PHONE NUMBER | EXTENSION | | (956) 491-3283 | | Date Hand-delivered or Date Postmarked | | | | | | | | | | | | | | |
| AREA CODE | PHONE NUMBER | EXTENSION | | | | | | | | | | | | | | | | | | | | |
| | (956) 491-3283 | | | | | | | | | | | | | | | | | | | | | |
| 6 CAMPAIGN TREASURER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; text-align: center;">FIRST</td> <td style="width:15%; text-align: center;">MI</td> <td style="width:35%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Dr. Rosalinda</td> <td></td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Rosie Cobarrubias</td> <td></td> <td></td> </tr> </table> | MS / MRS / MR | FIRST | MI | | | Dr. Rosalinda | | | NICKNAME | LAST | SUFFIX | | | Rosie Cobarrubias | | | Receipt # | Amount \$ | | | |
| MS / MRS / MR | FIRST | MI | | | | | | | | | | | | | | | | | | | | |
| | Dr. Rosalinda | | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | LAST | SUFFIX | | | | | | | | | | | | | | | | | | | | |
| | Rosie Cobarrubias | | | | | | | | | | | | | | | | | | | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:15%; font-size: 8px;">STATE;</td> <td style="width:15%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center;">27095 Baker Potts Rd Harlingen Tx 78552</td> </tr> </table> | | | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE | 27095 Baker Potts Rd Harlingen Tx 78552 | | | | | | | | | | | | | |
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| | (956) 454-1726 | | | | | | | | | | | | | | | | | | | | | |
| 9 REPORT TYPE | <table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table> | | | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | | | | | | | |
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| 10 PERIOD COVERED | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; text-align: center; font-size: 8px;">Month</td> <td style="width:10%; text-align: center; font-size: 8px;">Day</td> <td style="width:10%; text-align: center; font-size: 8px;">Year</td> <td style="width:10%; text-align: center; font-size: 8px;">THROUGH</td> <td style="width:10%; text-align: center; font-size: 8px;">Month</td> <td style="width:10%; text-align: center; font-size: 8px;">Day</td> <td style="width:10%; text-align: center; font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center;">01</td> <td style="text-align: center;">/ 01</td> <td style="text-align: center;">/ 2017</td> <td></td> <td style="text-align: center;">06</td> <td style="text-align: center;">/ 30</td> <td style="text-align: center;">/ 2017</td> </tr> </table> | | | Month | Day | Year | THROUGH | Month | Day | Year | 01 | / 01 | / 2017 | | 06 | / 30 | / 2017 | | | | | |
| Month | Day | Year | THROUGH | Month | Day | Year | | | | | | | | | | | | | | | | |
| 01 | / 01 | / 2017 | | 06 | / 30 | / 2017 | | | | | | | | | | | | | | | | |
| 11 ELECTION | <table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center; font-size: 8px;">ELECTION DATE</td> </tr> <tr> <td style="width:15%; font-size: 8px;">Month</td> <td style="width:15%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center;">05</td> <td style="text-align: center;">/ 24</td> <td style="text-align: center;">/ 2016</td> </tr> </table> | ELECTION DATE | | | Month | Day | Year | 05 | / 24 | / 2016 | <table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center; font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table> | | | ELECTION TYPE | | | <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> Runoff | <input type="checkbox"/> Other Description | <input type="checkbox"/> General | <input type="checkbox"/> Special | |
| ELECTION DATE | | | | | | | | | | | | | | | | | | | | | | |
| Month | Day | Year | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> General | <input type="checkbox"/> Special | | | | | | | | | | | | | | | | | | | | | |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) <div style="font-size: 1.5em;">Cameron County Judge</div> | | | | | | | | | | | | | | | | | | | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Daniel Sanchez 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

| | | |
|---|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE | COMMITTEE NAME |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

Additional Pages

| | | |
|-------------------------|---|--------------------------|
| 17 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ - 0 - |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ - 0 - |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ - 0 - |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ - 0 - |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 5000. ⁰⁰ - |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ - 0 - |

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Daniel Sanchez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Daniel A. Sanchez, this the 11th day of July, 2017, to certify which, witness my hand and seal of office.

Dalia Salinas
Signature of officer administering oath

Dalia Salinas
Printed name of officer administering oath

Notary
Title of officer administering oath