## PEDRO DELGADILLO

## CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE/ OFFICE USE ONLY **OFFICEHOLDER** NAME Date Received SUFFIX **CAMERON COUNTY** 4 CANDIDATE/ STATE: ZIP CODE DEPARTMENT OF ELECTIONS & OFFICEHOLDER VOTER REGISTRATION MAILING **ADDRESS** JAN 16 2018 POBOV 899 PORT ISAbel 121857 Change of Address RECEIVED 5 CANDIDATE/ **OFFICEHOLDER** (956) 908 - 1138 PHONE MS / MRS / MR Receipt # Amount \$ М 6 CAMPAIGN TREASURER NAME Date Processed SUFFIX Date Imaged ZIP CODE 7 CAMPAIGN STATE; TREASURER **ADDRESS** (Residence or Business) 10/3 Ebony St. Laquag Vista AREA CODE PHONE NUMBER EXTENSION 8 CAMPAIGN **TREASURER** 943-1410 PHONE 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded \$500 limit July 15 8th day before election Final Report (Attach C/OH - FR) 10 PERIOD Month Day COVERED 07/01/17 THROUGH 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Other Month Day Year Description General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (If known) Comeron On 4 **GO TO PAGE 2**

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME 15 FI			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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		,
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS		OLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED	\$ 0
	4. TOTALI	POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 38.70		\$ 338,70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$		\$ 0
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.  Comm. Expires 09-04-2020 Notary ID 12069619  Signature of Candinate or Officeholder			
AFFIX NOTARY STAMP/SEALABOVE			
The state of the s			
Sworn to and subscribed before me, by the said			
Month Smooth fortha Mendoze Notery Public			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			