

LAURA

BETANCOURT

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 28
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Mrs. Laura		L	
Betancourt			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	100 Stillinger Dr. Brownsville, TX 78521		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(956)	546-6384	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Mr. John		Serra	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	100 Stillinger Dr. Brownsville TX 78521		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(956)	203-6608	
9 REPORT TYPE	<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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 9th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year
	1	25	2018
THROUGH			Month Day Year
THROUGH			2 / 24 / 2018
11 ELECTION	ELECTION DATE		
	Month	Day	Year
3 / 6 / 2018			ELECTION TYPE
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		
	Cameron County Court at Law No. 2		
13 OFFICE SOUGHT (if known)			Cameron County Court at Law No. 2

OFFICE USE ONLY

Date Received
CAMERON COUNTY DEPARTMENT OF ELECTIONS & VOTER REGISTRATION
4:50pm FEB 26 2018
RECEIVED
BY: *[Signature]*

Date Hand-Delivered or Date Postmarked

Receipt #	Amount \$
Date Processed	
Date Imaged	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME
Laura L. Betancourt

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

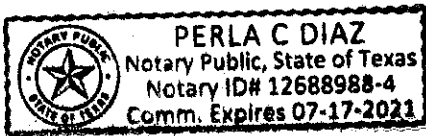
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO 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	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \$15,100.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 1,733.38
	4. TOTAL POLITICAL EXPENDITURES	\$ \$9,426.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4239.96
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Laura Betancourt, this the 26th day of February, 20 18, to certify which, witness my hand and seal of office.

[Handwritten Signature] Perla Diaz Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

**FORM JC/OH
COVER SHEET PG 3**

19 FILER NAME Laura L. Betancourt	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 15,100.00
2. <input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 804.50
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 300.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 9,426.66
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura L. Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Elizabeth Valdez Garza 6 Contributor address; City; State; Zip Code 1105 E. 6th St. Brownsville TX 78520	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Valdez Garza Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Juan T. Mendez III Contributor address; City; State; Zip Code 611 W. Levee Brownsville TX 78520	Amount of contribution (\$) \$1000.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Mendez Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rigoberto Flores Jr. Contributor address; City; State; Zip Code 801 E. Van Buren St Brownsville TX 78520	Amount of contribution (\$) \$650.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Rigoberto Jr.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura L. Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ruben Herrera 6 Contributor address; City; State; Zip Code 37 W. Elizabeth Brownsville TX 7850	7 Amount of contribution (\$) \$1000.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Ruben Herrera		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Reynaldo Cisneros Contributor address; City; State; Zip Code 950 E. Van Buren Brownsville TX 78520	Amount of contribution (\$) \$300.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Reynaldo Cisneros		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ R. Bruce Tharpe Contributor address; City; State; Zip Code 1120 E. 10th St. Brownsville TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of R. Bruce Tharpe		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J)1:

2 FILER NAME 3 Filer ID (Ethics Commission Filers)
 Laura L. Betancourt

4 Date 1/30/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Samuel Solana 6 Contributor address; City; State; Zip Code 914 E. Van Buren Brownsville TX 78520	7 Amount of contribution (\$) \$250.00
-------------------	---	---

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
--	---------------------------------------

10 Contributor's employer/law firm Law Office of Samuel Solana	11 Law firm of contributor's spouse (if any)
---	--

12 If contributor is a child, law firm of parent(s) (if any)

Date 1-30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Asim Zamir Contributor address; City; State; Zip Code 2100 W. San Marcelo Blvd #240 Brownsville TX 78521	Amount of contribution (\$) \$500.00
-----------------	---	---

Contributor's principal occupation Doctor	Contributor's job title Owner
--	----------------------------------

Contributor's employer/law firm Self Employed	Law firm of contributor's spouse (if any)
--	---

If contributor is a child, law firm of parent(s) (if any)

Date 1/31/17	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ricardo Alonzo Barrera Contributor address; City; State; Zip Code 1314 E. Harrison Harlingen TX 78550	Amount of contribution (\$) \$250.00
-----------------	--	---

Contributor's principal occupation Attorney	Contributor's job title Attorney
--	-------------------------------------

Contributor's employer/law firm The Barrera Law Firm	Law firm of contributor's spouse (if any)
---	---

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Abel Delgadillo 6 Contributor address; City; State; Zip Code 955 E. Tyler St. Brownsville TX 78520	7 Amount of contribution (\$) \$150.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Abel Delgadillo		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Korina Barraza Contributor address; City; State; Zip Code 1650 Paredes Line Rd Ste 104 Brownsville TX 78521	Amount of contribution (\$) \$300.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Barraza and Rabb		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ismael Hinojosa Contributor address; City; State; Zip Code 855 E. Harrison Brownsville TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Ismael Hinojosa		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Cerise R. De Garduno	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 845 E. Harrison Street Brownsville TX 78520		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Cerise R. De Garduno		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Maribel Roldan	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 302 Kings Highway Suite 107 Brownsville TX 78520		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Maribel Roldan		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ John Williamson	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 815 Ridgewood St Brownsville TX 78520		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of John Williamson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Paul Fourt 6 Contributor address; City; State; Zip Code 1000 E. Van Buren Brownsville TX 78520	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Paul Fourt		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Phil Bellamy Contributor address; City; State; Zip Code 815 Ridgewood St Brownsville TX 78520	Amount of contribution (\$) \$500.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Phil Bellamy		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/31/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Fernando Galvan Contributor address; City; State; Zip Code 924Belthair St Brownsville TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Fernando Galvan		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rene O. Oliveria 6 Contributor address; City; State; Zip Code 105 Calle Jacranda Brownsville TX 78520	7 Amount of contribution (\$) \$1000.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Roerig, Oliveria & Fisher		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Chester Gonzalez Contributor address; City; State; Zip Code 117 E. Price Rd Brownsville TX 78520	Amount of contribution (\$) \$500.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Chester Gonzalez		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Albert Rodriguez Contributor address; City; State; Zip Code 946 E. Van Buren Brownsville TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Harold Hugh Emerson 6 Contributor address; City; State; Zip Code 1364 Crestview Dr. Brownsville TX 78520	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation TEACHER		9 Contributor's job title TEACHER
10 Contributor's employer/law firm BISD		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Myles Garza Contributor address; City; State; Zip Code 1200 E. Harrison Brownsville TX 78520	Amount of contribution (\$) \$150.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Garza & Garza		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Rochelle Garza Contributor address; City; State; Zip Code 1200 E Harrison St Brownsville TX 78520	Amount of contribution (\$) \$150.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Garza & Garza		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Gary Ortega 6 Contributor address; City; State; Zip Code 424 E. Jefferson Brownsville TX 78520	7 Amount of contribution (\$) \$50.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Gary Ortega		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Reynaldo Garza III Contributor address; City; State; Zip Code 680 E. St. Charles Ste 600 Brownsville TX 78520	Amount of contribution (\$) \$2500.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Garza & Elizondo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Helen Delgadillo Contributor address; City; State; Zip Code 955 E. Tyler St Brownsville TX 78520	Amount of contribution (\$) \$200.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Helen Delgadillo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Timothy Lopes 6 Contributor address; City; State; Zip Code 830 Acacia Lake Dr.. Brownsville TX 78521	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Timothy Lopes		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Michael Trejo Contributor address; City; State; Zip Code 1192 E. 9th Street Brownsville TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Micheal P. Trejo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/2/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ John Haywood Contributor address; City; State; Zip Code 300 Garcia No. 6 Port Isabel TX 78578	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law office of John Haywood		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Maria Linda Gonzlaz 6 Contributor address; City; State; Zip Code 777 E. Harrison St Fl 2 Brownsville TX 78520	7 Amount of contribution (\$) \$250.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Maria Linda Gonzalez		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/6/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ David Kithcart Contributor address; City; State; Zip Code 1209 E. Harrison Ste B Harlingen TX 78520	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of David Kithcart		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/30/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Denton, Navarro, Rocha Bernal Hyde & Zech Contributor address; City; State; Zip Code 701 E. Harrison Suite 100 Harlingen TX 78550	Amount of contribution (\$) \$250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Denton, Navarro, Rocha Bernal Hyde & Zech		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME LAURA BETANCOURT		3 Filer ID (Ethics Commission Filers)
4 Date 2/17/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ YGNACIO DANIEL GARZA 6 Contributor address; City; State; Zip Code 3125 CENTRAL BLVD. BROWNSVILLE TX 78520	7 Amount of contribution (\$) \$500.00
8 Contributor's principal occupation ACCOUNTANT		9 Contributor's job title ACCOUNTANT
10 Contributor's employer/law firm LONG CHILTON LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/17/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ NARANJO & SALAZAR LAW FIRM Contributor address; City; State; Zip Code 30 PROVIDENCE CT STE 2 BROWNSVILLE TX 78526	Amount of contribution (\$) \$500.00
Contributor's principal occupation ATTORNEY		Contributor's job title ATTORNEY
Contributor's employer/law firm NARANJO & SALAZAR LAW FIRM		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/17/18	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ EDUARDO HERNANDEZ Contributor address; City; State; Zip Code 35 LAS VILLAS AVE BROWNSVILLE TX 78526	Amount of contribution (\$) \$200.00
Contributor's principal occupation Retired		Contributor's job title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME LAURA BETANCOURT		3 Filer ID (Ethics Commission Filers)
4 Date 2/17/18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ERIN GARCIA	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 905 E. LOS EBANOS STE B BROWNSVILLE TX 78520		
8 Contributor's principal occupation ATTORNEY		9 Contributor's job title ATTORNEY
10 Contributor's employer/law firm LAW OFFICE OF ERIN H. GARCIA		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME LAURA BETANCOURT		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 2/12/18	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICIA EDELSTEIN	8 Amount of Contribution \$ \$804.50	9 In-kind contribution description EVENT CATERING INVOICE
7 Contributor address; City; State; Zip Code 103 E PRICE RD STE A BROWNSVILLE TX 78521		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) ATTORNEY		11 Employer (FOR NON-JUDICIAL) (See Instructions) ATTORNEY	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J):
2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 1/29/18	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Betancourt	9 Loan Amount (\$) \$300.00
6 Is lender a financial institution? Y <input type="radio"/> N <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code 100 Stillinger Dr. Brownsville TX 78520	10 Interest rate N/A
		11 Maturity date N/A
12 Lender's Principal Occupation Judge		13 Lender's Job Title Judge
14 Lender's Employer/Law Firm Cameron County		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> none		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)	
4 Date 2/5/18		5 Payee name Perla Diaz			
6 Amount (\$) \$250.00		7 Payee address; City; State; Zip Code 34 East Dr Brownsville TX 78520			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Wages		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/5/18		Payee name Cobbleheads Bar & Grill			
Amount (\$) \$1870.32		Payee address; City; State; Zip Code 3154 Central Blvd Brownsville TX 78520			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/5/18		Payee name David Munguia			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 12317 Tio Cano La Feria TX 78559			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign work	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:		2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)	
4 Date 2/5/18		5 Payee name Maria Elena Cacayoren			
6 Amount (\$) \$125.00		7 Payee address; City; State; Zip Code 4845 Juniper Brownsville TX 78521			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) other		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Girls Night Out	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 2/6/18		Payee name Susana Freeman			
Amount (\$) \$125.00		Payee address; City; State; Zip Code 411 Lozano Ave Harlingen TX 78550			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Music	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 2/7/18		Payee name The Grafik Spot			
Amount (\$) \$238.15		Payee address; City; State; Zip Code 1265 N Expressway Brownsville TX 78520			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
4 Date 2/8/18	5 Payee name the Grafik Spot	
6 Amount (\$) \$1101.18	7 Payee address; City; State; Zip Code 1265 N Expressway Brownsville TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/9/18	Payee name Jose A. Garza	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 409 W. Levee Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/9/18	Payee name De Ayala Bakery	
Amount (\$) \$142.80	Payee address; City; State; Zip Code 895 Calle Milpa Verde Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Desserts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
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4 Date 2/12/18	5 Payee name Asurion Wireless Insurance
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 648 Grassmere Park Nashville TN 37211
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/12/18	Payee name The Grafik Spot
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Amount (\$) \$484.15	Payee address; City; State; Zip Code 1265 N Expressway Brownsville TX 78520
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/13/18	Payee name Ms. South Texas Senior Pageant
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 14464 F.M. 1018 Lyford Texas 78569
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad Sponsor
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
4 Date 2/15/18	5 Payee name Catholic Daughters	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1300 E. Los Ebanos Blvd Brownsville TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/20/18	Payee name Gabino Vasquez	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1954 E 14th Street Brownsville TX 78521	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/20/18	Payee name Storage Depot	
Amount (\$) \$115.32	Payee address; City; State; Zip Code 654 N Expressway 77 Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage for signs
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:		2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)	
4 Date 2/20/18		5 Payee name Gio Villa			
6 Amount (\$) \$117.37		7 Payee address; City; State; Zip Code 2325 Central Blvd Brownsville TX 78520			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal with constituents	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/20/18		Payee name Walmart			
Amount (\$) \$157.37		Payee address; City; State; Zip Code 2205 Ruben M. Torres Blvd Brownsville TX 78526			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/20/18		Payee name Jose A Garza Jr			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 409 W. Levee Brownsville TX 78520			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense get out the vote	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
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4 Date 2/20/18	5 Payee name Dann Rivera
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6 Amount (\$) \$1000.00	7 Payee address; City; State; Zip Code 5196 Sugermill Rd Brownsville TX 78526
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone banking
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/18	Payee name Eduardo Flores
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 2405 E. 30th St Brownsville TX 78520
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transporation Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/18	Payee name Mario Saenz
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 84 N. Iowa Street Brownsville TX 78521
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense put up signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	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.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
4 Date 2/1/18	5 Payee name Laura Betancourt	
6 Amount (\$) \$1000.00	7 Payee address; City; State; Zip Code 100 Stillinger Dr Brownsville TX 78521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense loan
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/7/18	Payee name Mini De Los Santos	
Amount (\$) \$400.00	Payee address; City; State; Zip Code Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Wages	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wages
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 2/9/18	Payee name Desi Serrata	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 28th Street Brownsville TX 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Wages	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out Of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
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4 Date 2/16/18	5 Payee name Jose A. Garza Jr
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 409 W. Levee Brownsville TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Wages	(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wages
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/20/18	Payee name Felix Munoz
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Amount (\$) \$125.00	Payee address; City; State; Zip Code Los Fresnos TX 78566
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) gift	Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gift for constituents
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/20/18	Payee name Walmart
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 3500 Alton Gloor Blvd Brownsville TX 78526
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Early voting supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

