LAURA BETANCOURT

	CANDIDATE / OFFICEHOLD N FINANCE REPORT	ER	FORM JC/OH COVER SHEET PG 1	
The JC/OH Instruction	Guide explains how to complete this form.	Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE/ OFFICEHOLDER NAME	Mrs. Laura NICKNAME LAST	M! L SUPPIX	OFFICE USE ONLY Date Received CAMERON COUN DEPARTMENT OF ELEC	TY TONS &
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE/ OFFICEHOLDER PHONE	100 Stillinger Dr. Brownsville, TX 78	STATE; ZIP CODE 8521 EXTENSION	VOTER REGISTRA VOTER REGISTRA FEB 26 20 RECEIVED BY: Date Hand-Sellvered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr. John NIGKNAME LAST Serra	MI SUFFIX	Hecelpt # Amount \$ Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;	CITY: STATE; Ville TX 78521	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER E (956) 203-6608	EXTENSION		
9 REPORT TYPE	January 15 30th day before election July 15 X 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (Oiltceholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 1 / 25 / 2018 THROUGH	Month Day 2 / 24 /	Year / 2018	
11 ELECTION	BLECTION DATE Month Day Year X Primary Runoff 3 6 2018 General Special	ELECTION TYPE Other Description		
12 OFFICE	·	OFFICE SOUGHT (II KNOWN	Court at Law No. 2	
	GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME			15 Filer ID (Ethlos Commission Filers)		
Laura L. Beta	ancourt		Not the (manner continuous) I notal		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR N	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDI DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE W INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH URES.	ITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S		
	COMMITTEE TYPE	COMMITTEE NAME			
	·				
	GENERAL	COMMITTEE ADDRESS			
i	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR QUARANTEES 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		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF Y OF THE REPORTING PERIOD	THE \$ 20.00		
18 AFFIDAVIT		true and correct and netudes all info	erjury, that the accompanying report is rmation required to be reported by me		
Notar Not Com	PERLA C DIA y Public, State of tary ID# 126889 m. Expires 07-17	7 Texas 88-4 1-2021	didate or Officeholder		
AFFIX NOTARY STAMP			this the 26th		
day of February		y the said Laura Betancourt o certify which, witness my hand and seal of office.	, unsure		
Xell		Perla Diaz	lotary Public		
Signature of officer ac	Iministering cath	Printed name of officer administering cath	Title of officer administering oath		

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

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura L. Betancourt 7 Amount of contribution (\$) 4 Date 5 Full name of contributor Out-of-state PAG ID#:_ Elizabeth Valdez Garza 1/30/18 \$250.00 6 Contributor address; City; State; Zip Code 1105 E. 6th St. Brownsville TX 78520 8 Contributor's principal occupation Contributor's job title Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Valdez Garza Law Firm 12 If contributor is a child, law firm of parent(s) (If any) Amount of contribution (\$) Date Full name of contributor out-of-state PAC ID#;__ Juan T. Mendez III 1/30/18 \$1000.00 City; State; Zip Gode Contributor address; Brownsville TX 78520 611 W. Levee Contributor's principal occupation Contributor's job title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Mendez Law Firm If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor aut-of-state PAC 10#:___ Amount of contribution (\$) Rigoberto Flores Jr. 1/30/18 \$650.00 Contributor address; City; State: Zip Code 801 E. Van Buren St Brownsville TX 78520 Contributor's Job title Contributor's principal occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Office of Rigoberto Jr. 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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura L. Betancourt 7 Amount of contribution (\$) 5 Full name of contributor Out-of-state PAC 10#:_ Ruben Herrera 1/30/18 \$1000.00 Contributor address; City; State; Zip Code 37 W. Elizabeth Brownsville TX 7850 8 Contributor's principal occupation Contributor's job title Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Law Office of Ruben Herrera 12 If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor out-of-state PAC ID#:_ Reynaldo Cisneros 1/30/18 \$300.00 Contributor address; City; State; Zip Code 950 E. Van Buren Brownsville TX 78520 Contributor's principal occupation Contributor's job title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Office of Reynaldo Cisneros If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Out-of-state PAC IDI:_ Amount of contribution (\$) R. Bruce Tharpe 1/30/18 \$250.00 Contributor address; City; State: Zip Code 1120 E. 10th St. Brownsville TX 78520 Contributor's principal occupation Contributor's job title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (If any) Law Office of R. Bruce Tharpe 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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura L. Betancourt 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC ID#:_ Samuel Solana 1/30/18 \$250.00 6 Contributor address; City; State; Zip Code 914 E. Van Buren Brownsville TX 78520 8 Contributor's principal occupation Contributor's job title Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Law Office of Samuel Solana 12 If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor out-of-state PAC IDII:_ Asim Zamir 1-30/18 \$500.00 Contributor address; City; State; Zip Code 2100 W. San Marcelo Blvd #240 Brownsville TX 78521 Contributor's principal occupation Contributor's job title Doctor Owner | Contributor's employer/law firm Law firm of contributor's spouse (if any) Self Employed If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of contribution (\$) out-of-state PAC 10#: Ricardo Alonzo Barrera 1/31/17 \$250.00 City; State: Zip Code Contributor address; 1314 E. Harrison Harlingen TX 78550 Contributor's Job title Contributor's principal occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) The Barrera Law Firm 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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura Betancourt 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-slate PAC (O#:_ Abel Delgadillo 1/31/18 \$150.00 6 Contributor address; City; State; Zip Code Brownsville TX 78520 955 E. Tyler St. 9 Contributor's job title 8 Contributor's principal occupation Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Law Office of Abel Delgadillo 12 If contributor is a child, law firm of parent(s) (if any) Amount of contribution (\$) Date Full name of contributor out-of-state PAC 3D#:__ Korina Barraza \$300.00 1/31/18 City; State; Zip Code Contributor address; 1650 Paredes Line Rd Ste 104 Brownsville TX 78521 Contributor's principal occupation Contributor's Job title Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Barraza and Rabb If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor out-of-state PAC 'ID#:_ Ismael Hinojosa 1/31/18 \$250.00 City; State: Zip Code Contributor address; 855 E. Harrison Brownsville TX 78520 Contributor's principal occupation Contributor's job title Attorney Attorney Law firm of contributor's spouse (if any) Contributor's employer/law firm Law Office of Ismael Hinojosa 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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura Betancourt 4 Date 7 Amount of contribution (\$) 5 Full name of contributor aut-of-state PAC ID#:_ Cerise R. De Garduno \$250.00 1/31/18 6 Contributor address; City; State; Zip Code 845 E. Harrison Street Brownsville TX 78520 8 Contributor's principal occupation 9 Contributor's job title Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Law Office of Cerise R. De Garduno 12 If contributor is a child, law firm of parent(s) (if any) Amount of contribution (\$) Date Full name of contributor ut-of-state PAC ID#; Maribel Roldan 1/31/18 \$250.00 City; State; Zip Code Contributor address; 302 Kings Highway Suite 107 Brownsville TX 78520 Contributor's job title Contributor's principal occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Office of Maribel Roldan If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor out-of-state PAC 1D#:_ John Williamson \$500.00 1/31/18 City; State: Zlp Code Contributor address; Brownsville TX 78520 815 Ridgewood St Contributor's principal occupation Contributor's job title Attorney Attorney Contributor's employer/law firm Law tirm of contributor's spouse (if any) Law Office of John Williamson 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

Ĺ <u></u>				
1	The Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1:	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Laura Be	tancourt			
4 Date	5 Full name of contributor	ID#:)	7 Amount of contribution (\$)	
1/31/18	6 Contributor address; City; State;	· · ·	\$500.00	
	1000 E. Van Buren Brownsville T	X 78520		
8 Contributor's p	orincipal occupation	9 Contributor's job title		
Attorney		Attorney		
10 Contributor's e	employer/law firm	11 Law firm of contributor	s spouse (if any)	
Law Office o				
12 If contributor is	s a child, law firm of parent(s) (if any)	•		
5.			Amount of contribution (\$)	
Date	Full name of contributor 🔲 out-of-state PAC 1	D#:	Amount of contribution (\$)	
1/31/18	Phil Bellamy		\$500.00	
Contributor address; City; State; Zip Code				
	815 Ridgewood St Brownsville TX	(78520		
Contributor's p	principal occupation	Contributor's job title		
Attorney		Attorney		
	mployer/law firm	Law firm of contributor's	s spouse (if any)	
Law Office	of Phil Bellamy			
	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC 'li Fernando Galvan	D#:	Amount of contribution (\$)	
1/31/18	Contributor address; City; State:	Zip Gode	\$250.00	
	924Belthair St Brownsville TX 78	520		
Contributor's p	rincipal occupation	Contributor's job title		
Attorney		Attorney		
	mployer/law tirm	Law firm of contributor's	s spouse (if any)	
Law Office of	of Fernando Galvan	l		
	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

т	he Instruction Guide explains how to complete this to	rm.	1 Total pages Schedule A(J)1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Laura Betan	court		
4 Date	5 Full name of contributor out-of-slate PAC ID:)#:)	7 Amount of contribution (\$)
	Rene O. Oliveria		
2/2/18	6 Contributor address; City; State;	Zip Code	\$1000.00
	105 Calle Jacranda Brownsville TX 78		
	principal occupation	9 Contributor's job title	
Attorney		Attorney	- 44.4 A
10 Contributor's e		11 Law firm of contributor's	s spouse (If any)
	veria & Fisher		
12 if contributor is	s a child, law firm of parent(s) (if any)		
			the star (b)
Date	Full name of contributor	#:)	Amount of contribution (\$)
2/2/18	Contributor address; Gity; State;	Zlp Gode	\$500.00
	117 E. Price Rd Brownsville TX 7852	20	
Contributor's p	orincipal occupation	Contributor's Job title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's	s spouse (if any)
	of Chester Gonzalez		
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor	r:)	Amount of contribution (\$)
	Albert Rodriguez		
2/2/18	,	70 Oada	\$250.00
	Contributor address; City; State:	-	
	946 E. Van Buren Brownsville TX 7852		
•	rincipal occupation	Contributor's job title	
Attorney		Attorney	40 A
Contributor's er	mployer/law firm	Law firm of contributor's	s spouse (Ir any)
If contributor is	a child, law firm of parent(s) (if any)		
	•		
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS N	EEDED

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

	The Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
2 FILER NAMI	₹		3 Filer ID (Ethics Commission Filers)
Laura Bet	ancourt		
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)
2/2/18	Harold Hugh Emerson 6 Contributor address; City; State;		\$100.00
	1364 Crestview Dr. Brownsville TX	78520	
8 Contributor's TEAC	principal occupation HER	9 Contributor's job title TEACHER	
10 Contributor's BISD	employer/law firm	'i' 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	O#:)	Amount of contribution (\$)
2/2/18	Myles Garza Contributor address; City; State;	Zip Code	\$150.00
	1200 E. Harrison Brownsville TX 785		
	principal occupation	Contributor's job tille	
Attorney		Attorney	DEA
	employer/law firm	Law firm of contributor's	s spouse (if any)
Garza &	Garza Is a child, law ilrm of parent(s) (if any)		
n oon water	is a comparation of parameter (* 2007)		
Date	Full name of contributor)	Amount of contribution (\$)
2/2/18	Contributor address; City; State:	Zip Code	\$150.00
	1200 E Harrison St Brownsville TX 785		
	principal occupation	Contributor's Job title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's	s spouse (if any)
Contributor's			
Contributor's Garza & Ga	arza		
Contributor's Garza & Ga			

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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Laura Betancourt 7 Amount of contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC ID#:_ Gary Ortega ⁶ Contributor address; City; State; Zip Code 2/2/18 \$50.00 424 E. Jefferson Brownsville TX 78520 8 Contributor's principal occupation 9 Contributor's job title Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Law Office of Gary Ortega 12 If contributor is a child, taw firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor ut-of-state PAC ID#:_ Reynaldo Garza III \$2500.00 2/2/18 Contributor address; City; State; Zip Code 680 E. St. Charles Ste 600 Brownsville TX 78520 Contributor's job title Contributor's principal occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Garza & Elizondo If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor ___ out-of-state PAC 'IO#;__ Helen Delgadillo \$200.00 2/2/18 Contributor address; City; State: Zip Code 955 E. Tyler St Brownsville TX 78520 Contributor's Job tiltle Contributor's principal occupation Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Office of Helen Delgadillo If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

<u></u>			
	The Instruction Guide explains how to complete this I	form.	1 Total pages Schedule A(J)1:
2 FILER NAME	<u> </u>		3 Filer ID (Ethics Commission Filers)
Laura Beta	ancourt		
4 Date	5 Full name of contributor ovt-of-state PAC	ID#:	7 Amount of contribution (\$)
	Timothy Lopes		
2/2/18	6 Contributor address; City; State	e; Zip Code	\$100.00
	830 Acacia Lake Dr Brownsville T		
8 Contributor's	principal occupation	9 Contributor's job title	,
Attorney		Attorney	
	employer/law firm	11 Law firm of contributor's	's spouse (if any)
Law Office	of Timothy Lopes		
	ls a child, law firm of parent(s) (if any)	,	
	1		
Date	Full name of contributor	,D#:	Amount of contribution (\$)
	Michael Trejo		
2/2/18	Contributor address; City; State;	Zip Gode	\$250.00
	1192 E. 9th Street Brownsville TX 78		
Contributor's p	principal occupation	Contributor's job title	
Attorney		Attorney	· · · · · · · · · · · · · · · · · · ·
	employer/law firm	Law firm of contributor's	s spouse (if any)
	of Micheal P. Trejo	L	
If contributor is	s a child, law firm of parent(s) (If any)		
Date	F. 11 4		A
Date or	Full name of contributor Dout-of-state PAC TO	»#:	Amount of contribution (\$)
0/0/40	John Haywood		ቀለርስ ለስ
2/2/18	Contributor address; City; State:	Zip Code	\$250.00
	300 Garcia No. 6 Port Isabel TX 785	578	
Contributor's p	principal occupation	Contributor's job title	W8-7-4-7-7
Attorney		Attorney	
Contributor's e	employer/ław firm	Law firm of contributor's	s spouse (If any)
Law office o	of John Haywood		
If contributor is	s a child, law firm of parent(s) (if any)		
	·		
	,		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

7	The Instruction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1:
2 FILER NAME		-	3 Filer ID (Ethics Commission Filers)
Laura Bel	tancourt		
4 Date	5 Full name of contributor	1D#:	7 Amount of contribution (\$)
	Maria Linda Gonzlaz		
2/2/18	6 Contributor address; City; State;	; Zip Code	\$250.00
		le TX 78520	
8 Contributor's p	principal occupation	9 Contributor's job title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor	's spouse (if any)
	f Maria Linda Gonzalez		
12 if contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	iD#;	Amount of contribution (\$)
	David Kithcart		
2/6/18	Contributor address; City; State;	Zip Code	\$250.00
	1209 E. Harrison Ste B Harlingen T	TX 78520	
Contributor's p	principal occupation	Contributor's job title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's	s spouse (if any)
Law Office of	of David Kithcart		
if contributor is	s a child, law firm of parent(s) (if any)	<u></u>	
Date	Full name of contributor 🔲 out-of-state PAC 10	D#:)	Amount of contribution (\$)
1/30/18	Denton, Navarro, Rocha Bernal Hyde	& Zech	
1/30/10	Contributor address; City; State:		\$250.00
		TX 78550	
•	rincipal occupation	Contributor's job title	
Attorney		Attorney	
Contributor's er	mployer/law firm	Law firm of contributor's	spouse (if any)
	arro, Rocha Bernal Hyde & Zech		
If contributor is	a child, law firm of parent(s) (if any)		
	•		
	•		
	ATTA OU A DOUTIONAL CODICO OL	r rung gottröttt in ko lit	
	ATTACH ADDITIONAL COPIES OF	r This schedule as ne	EDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) LAURA BETANCOURT 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC [D#:____ YGNACIO DANIEL GARZA 2/17/18 6 Contributor address; City; State; Zip Code \$500.00 3125 CENTRAL BLVD. BROWNSVILLE TX 78520 8 Contributor's principal occupation 9 Contributor's job title ACCOUNTANT **ACCOUNTANT** 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) LONG CHILTON LLP 12 If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) NARANJO & SALAZAR LAW FIRM 2/17/18 \$500.00 Contributor address; City; State; Zip Code 30 PROVIDENCE CT STE 2 BROWNSVILLE TX 78526 Contributor's principal occupation Contributor's job title ATTORNEY **ATTORNEY** Contributor's employer/law firm Law firm of contributor's spouse (if any) NARANJO & ŚALAZAR LAW FIRM If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor _____ out-of-state PAC 'ID#:__ Amount of contribution (\$) EDUARDO HERNANDEZ 2/17/18 City; State: Zip Code \$200.00 Contributor address; 35 LAS VILLAS AVE BROWNSVILLE TX 78526 Contributor's job title Contributor's principal occupation Retired Retired 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) 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 SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME LAURA BETANCOURT 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC ID#: ERIN GARCIA \$250.00 2/17/18 6 Contributor address; City; State; Zip Code 905 E. LOS EBANOS STE B BROWNSVILLE TX 78520 8 Contributor's principal occupation 9 Contributor's job title **ATTORNEY** ATTORNEY 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) LAW OFFICE OF ERIN H. GARCIA 12 If contributor is a child, law firm of parent(s) (if any) Date Amount of contribution (\$) Full name of contributor Out-of-state PAC ID#:___ City; State; Zip Code Contributor address: 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 Amount of contribution (\$) Out-of-state PAG 1D#:_ City; State: Zip Code Contributor address: Contributor's principal occupation Contributor's job title Law firm of contributor's spouse (If any) Contributor's employer/law firm 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.

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) LAURA BETANCOURT 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 5 Date 6 Full name of contributor | out-of-state PAC (ID#:_ 8 Amount of 9 in-kind contribution Contribution \$. description PATRICIA EDELSTEIN \$804.50 **EVENT CATERING** 2/12/18 7 Contributor address; City; State; Zip Code INVOICE 103 E PRICE RD STE A BROWNSVILLE TX 78521 Check If travel obliside of Texas, Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See Instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) ATTORNEY **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) Amount of In-kind contribution Full name of contributor | | out-of-state PAC (ID#); Date Contribution \$ Contributor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See Instructions) 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 Ir	estruction Guide explains how to complete this	form.	1 Total pages Schedule E(J):	
2 FILER NAME Laura Betanco	ourt .		3 Filer tD (Ethics Commission Filers)	
4 TOTAL OF UNI	TEMIZED LOANS		\$	
5 Date of loan	7 Name of lender out-of-state_PAC	(ID#;)	9 Loan Amount (\$)	
1/29/18	Laura Betancourt		\$300.00	
6 Is lender	8 Lender address; City;	State; Zip Code	10 Interest rate	
a financial Institution?	100 Cillings Dr. Drown ordin TV 700	-00	N/A	
Y (N)	100 Stillinger Dr. Brownsville TX 785	020	11 Maturity date	
			N/A	
12 Lender's Principal	Occupation	13 Lender's Job Title		
Judge		Judge		
14 Lender's Employer, Cameron County	/Law Firm	15 Law Firm of lender's spou	se (If any)	
	law firm of parent(s) (if any)		. ,	
17 Description of Collateral		18 Check if personal funds were deposited into political account (See Instructions)		
none				
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)	
	21 Guarantor address; City;	State; Zip Code	- 	
not applicable 23 Guarantor's Princip	al Occupation	24 Guarantor's Job Title		
25 Guarantor's Employ	/er/Law Firm	26 Law Firm of guarantor's spouse (if any)		
27 If guarantor is a chi	ild, law firm of parent(s) (If any)	J.,		
lf le	ATTACH ADDITIONAL COPIES of the contract of th			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

Centributions/Donations Made B Candidate/Office/holder/Politics Credit Card Payment		Wages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
2/5/18	Perla Diaz	
6 Amount (\$)	7 Payee address; City; State; Zip Gode	
\$250.00	34 East Dr Brownsville TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Wages	(b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
2/5/18	Cobbleheads Bar & Grill	
Amount (\$)	Payee address; City; State; Zip Code	
\$1870.32	3154 Central Blvd Brownsville TX 7852	20
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check If travel outside of Yexas. Complete Schedule T. 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	Payee name	
2/5/18	David Munguia	
Amount (\$)	Payee address; City; State; Zip Code	
\$100.00	12317 Tio Cano La Feria TX 78559	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Check if travel outside of Texas, Complete Schedule T, 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 S	SCHEDULE AS NEEDED

SCHEDULE F1

	EXPENDITURE CATEGO	ORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contribulions/Donations Made I Candidate/Officeholder/Politic Credit Carll Payment	Fees (Food/Beverage Expense By Gift/Awards/Memorials Expense	Loan Repaymen/Reknbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Weges/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)			
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 (\$)	7 Payee address; City; State; Zip	Code				
\$125.00	4845 Juniper Brownsville TX 7	8521				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche other	Check if travel of Chack if Austin	utside of Texas. Complete Schedula T. n, TX, officeholder läving expense r Girls Night Out			
Complete ONLY if direct expenditure to benefit C/OI	 Candidate / Officeholder name 	Office sought	Office held			
Date	Payee name					
2/6/18	Susana Freeman					
Amount (\$)	Payee address; City; State; Zip (Dode				
\$125.00	411 Lozano Ave Harlingen TX 78	3550				
	Category (See Categories listed at the top of this scher	, , , , , , , , , , , , , , , , , , ,				
PURPOSE OF EXPENDITURE	Check if Austin, TX, officeholder living expense Other Music					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
Date	Payee name					
2/7/18	The Grafik Spot					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$238.15	1265 N Expressway Brownsville	TX 78520				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Description Check if ravel outside of Texas, Complete Schedule T. Check if Austlin, TX, officeholder living expense Signs					
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held {			
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEE!	DED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loah Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politic Gredit Card Payment	al Committee	Legal Services			iges/Contract Labor	Other (enter a cate	gory not listed abo	ove)
	,	The Instruct	ion Guide explain	s how to co	mplete this form.	·		
1 Total pages Schedule F1:	2 FILER N Laura B	NAME letancourt				3 Filer ID (Ethi	cs Commission	Filers)
4 Date	5 Payeen							
2/8/18	the Gra	fik Spot						
6 Amount (\$)	7 Рауве а	ddress;	City; State; Zi	p Code				
\$1101.18	1265	N Expressw	ay Brownsville	e TX 785	20			
8	(a) Categor	y (See Categories ii	sted at the top of this so	chedula)	(b) Description			
PURPOSE					Check lift ravel of	utskie of Texas. Complete	Schedule T.	
OF	Print	ing Expense	.	1	Check if Austir	n, TX, officeholder living	i expense	
EXPENDITURE				}	Signs			
	L							
9 Complete ONLY if direct expenditure to benefit C/O		late / Officehold	er name		Office sought	· · · · · · · · · · · · · · · · · · ·	Office held	
Date	Payee na	ame						
2/9/18	Jose A.	Garza						
Amount (\$)	Payee a	idress;	City; State; Zip	o Code				
\$100.00	409 W. L	_evee Brov	nsville TX 78	3520				
PURPOSE OF EXPENDITURE		(See Categories lie	ted at the top of this ac	hedule)	<u> </u>	side of Texas. Complete S TX, officeholder living		
Complete ONLY if direct expenditure to benefit C/OH		ate / Officehold	or name	<u>I</u>	Office sought		Office held	
Date	Payee ne	ıme						
2/9/18	De A	yala Bakery						
Amount (\$)	Payee ad	dress;	City; State; Zip	Code				
\$142.80	895 Ca	ile Milpa Ve	rde Brownsv	ille TX 78	3520			
	Category	(See Categories list	ed at the top of this sch	(aluber	Description		- N-L-NV	
PURPOSE	_		_		Gheck If travel outs	ide of Texas, Complete Sc	trechde T.	
OF EXPENDITURE	Food	d/Beverage	Expense		Check If Austin,	TX, afficeholder living a	expense	
					Desserts			
Complete ONLY If direct		ite / Officehold	er name		Office sought		Office held	
expenditure to benefit C/OH								· · · · · · · · · · · · · · · · · · ·
	TTA	ACH ADDITIO	NAL COPIES O	FTHISSC	HEDULE AS NEE	DED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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/Officenolder/Politica Credit Card Payment	al Committee Legal Services Salanesv The Instruction Guide explains how to e	omplete this form. Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID (Ethics Commission Filers)
4 Date 2//12/18	5 Payee name Asurion Wireless Insurance	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$200.00	648 Grassmere Park Nashville TN 3721	1
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cell Phone
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
2/12/18	The Grafik Spot	
Amount (\$)	Payee address; City; State; Zip Code	
\$484.15	1265 N Expressway Brownsville TX 785	520
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check# tovel outside of Texas. Gamplete Schedule T. Check # Austin, TX, officeholder Uving expense Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Рауее пате	
2/13/18	Ms. South Texas Senior Pageant	
Amount (\$)	Payee address; City; State; Zip Gode	
\$150.00	14464 F.M. 1018 Lyford Texas 78569	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Advertising Expense	Check If Austin, TX, officeholder living expense Ad Sponsor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advartising Expense
Accounting/Banking
Consulting Expense
Contributions/Conations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services Loan Repayment/Relmbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing 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.	Other (enter a category nothsted anove)	
1 Total pages Schedule Ft	2 FILER NAME Laura Betancourt		3 Filer ID (Ethics Commission Filers)	
4 Date 2/15/18	5 Payee name Catholic Daughters			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$100.00	1300 E. Los Ebanos Blvd Brownsville TX 78520			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		uside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held	
Date	Payes name			
2/20/18	Gabino Vasquez			
Amount (\$)	Payee address; City; State; Zip Code			
\$100.00	1954 E 14th Street Brownsville TX 785	521		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Expense	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder fiving expense Gas		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
2/20/18	Storage Depot			
Amount (\$)	Payee address; City; State; Zip Code			
\$115.32	654 N Expressway 77 Brownsville TX 78520			
PURPOSE	Category (See Calegories listed at the lop of this schedule)	Description Check if travel outsi	de of Texas, Complete Schedule T.	
OF EXPENDITURE	Other		IX, officeholder living expense	
		Storage for	signs	
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEED)ED	

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

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 Glif/Awards/Memorials Expense Legal Services

Loan Repayment/Relimbureement Office Overhead/Rental Expense Polling Expense Printing Expansa Salaries/Wages/Oontract Labor

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District

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	5 Payee name			
2/20/18	Dann Rivera			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1000.00	5196 Sugermill Rd Brownsville TX 7852	26		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE		Check if travel outside of Texas, Complete Schedule T.		
OF EVERTIBET IDE	Combined Labor	Check if Austin, TX, officeholder living expense		
EXPENDITURE	Contract Labor	Telephone banking		
9 Complete ONLY if direct expenditure to benefit C/Ol-	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
2/21/18	Eduardo Flores			
Amount (\$)	Payee address; City; State; Zip Code			
\$100.00	2405 E. 30th St Brownsville TX 785	20		
	Calegory (See Calegories listed at the top of this schedule)	Description		
PURPOSE		Chack if travel outside of Texas, Complete Schedule T.		
OF	Transporation Expense	Check if Austin, TX, officeholder living expense		
EXPENDITURE	Transporation Expense	Gas		
Complete ONLY if direct expenditure to benefit G/OH	Candidate / Officeholder name	Office sought Office held		
Date	Рауее пате			
2/21/18	Mario Saenz			
Amount (\$)	Payee address; City; State; Zip Code			
\$200.00	84 N. Iowa Street Brownsville TX 78521			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel outskie of Texas. Complete Schedule T.		
OF EXPENDITURE	Contract Labor	Check if Austin, TX, afficeholder fiving expense		
	OSTITUOT EASOT	put up signs		
Complete ONLY If direct	Candidate / Officeholder name	Office sought Office held		
expenditure to benefit G/OH		`{		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consolling Expense Contributions/Donalions Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gid/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

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

Candiday/Onicendider/Politica Credit Card Payment	The instruction Guide explains how to		a calegory not listed above)
1 Total pages Schedule F1:	2 FILER NAME Laura Betancourt	3 Filer ID	(Ethics Commission Filers)
4 Date	5 Payee name		·
2/1/18	Laura Betancourt		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1000.00	100 Stillinger Dr Brownsville TX 78521		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Checkfiravel cuiside of Texas, Co	mplete Schedule T,
OF EXPENDITURE	Loan Repayment	Check if Auslin, TX, officeholds	er living expense
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	**************************************	
2/7/18	Mini De Los Santos		
Amount (\$)	Payee address; City; State; Zip Code		
\$400.00	Brownsville TX 78520		
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this schedule) Wages	Description Check if travel outside of Texas. Com Check if Austin, TX, officeholder Wages	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		,
2/9/18	Desi Serrata		
Amount (\$)	Payee address; City; State; Zip Code		
\$400.00	28th Street Brownsville TX 78520	•	
	Category (Sea Categories listed at the top of this schedule)	Description	
PURPOSE OF		Check If travel outside of Texas, Comp	• •
EXPENDITURE	Wages	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 S	CHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Olfice Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Legal Services Candidate/Officeholder/Political Committee Other (enter a category not listed above) Gredit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filter ID (Ethics Commission Filers) Laura Betancourt 4 Date 5 Payee name 2/16/18 Jose A. Garza ^{Jr} 6 Amount (\$) 7 Payee address; City; State; Zip Code \$100.00 409 W. Levee Brownsville TX 78520 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check If travel outside of Yexas, Complete Schedule T, PURPOSE Wages OF EXPENDITURE Check if Austin, TX, officeholder living expense wages Candidate / Officeholder name Office sought 9 Complete ONLY if direct Office held expenditure to benefit G/OH Pavee name Date 2/20/18 Felix Munoz Payee address; City; State; Zip Code Amount (\$) \$125.00 Los Fresnos TX 78566 Category (See Categories listed at the top of this schedule) __ Check if travel outside of Texas, Complete Schedule T. PURPOSE OF EXPENDITURE Check If Austin, TX, officeholder living expense gift gift for constituents Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Office held Date Payee name 2/20/18 Walmart Payee address; Amount (\$) City; State; Zip Code 3500 Alton Gloor Blvd Brownsville TX 78526 \$200.00 Category (See Calegories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE Check if Austin, TX, afficeholder living expense food/Beverage Expense Early voting supplies Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category pot listed shows)

Contributions/Donations Made E Candidate/Officeholder/Politica Credit Card Payment	By Gift/Awards/Memorials Expense Printing	g Expense Travel Out Of District SWages/Contract Labor Other (enter a category not listed above) o 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 Feliz Munoz	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$175.00	Los Fresnos TX 7856	6
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Wages	(b) Description Check if ravet outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	V* 439 00	wages
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zlp Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED