# ERIC GARZA

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY
NAME	MR. ERIC		Date Received
	GARZA		CAMERON COUNTY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; P O BOX 4173 BROWNSVILLE TX 78520	CITY; STATE; ZIP CODE	DEPARTMENT OF ELECTIONS VOTER REGISTRATION  4:1000 FEB 26 2018
Change of Address  5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER ( 956 ) 551-0155	EXTENSION	BY: Date Hand-delivered to bat Charles
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST  MR. R. BRUCE	МІ	Receipt # Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Processed  Date Imaged
	THARPE  STREET ADDRESS (NO PO BOX PLEASE); APT / S		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	P O BOX 4173 BROWNSVILLE TX 78520	SUITE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER ( 956 ) 551-0155	EXTENSION	
9 REPORT TYPE	January 15 30th day before	e election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 X 8th day before el	election Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year  01 26 2018	THROUGH 02	Day Year <b>2018</b>
11 ELECTION	Month Day Year X Primary  03 / 06 / 2018  General	Description	
12 OFFICE	OFFICE HELD (if any)  DISTRICT CLERK	13 OFFICE SOUGHT (if known) DISTRICT CLERI	
	go то	PAGE 2	

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

### FORM C/OH COVER SHEET PG 2

14 C/OH NAME ERIC GARZ	A	1!	5 Filer ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SAL SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHO			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	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)		\$ 0.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 948.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 2,566.98	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 13,759.00	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		* 0.00	
18 AFFIDAVIT  BRE MY C	ENDA CARMELA CANTU OMMISSION EXPIRE August 26, 2018	S Ways	mation required to be reported by me  date or Officeholder	
Sworn to and subscr		y the said ERIC GARZA	, this the <b>26TH</b>	
day of FEBRUAR		o certify which, witness my hand and seal of office.		
7 6		Brenda Cantu Nota	by farle St. of IX	
Signature of officer ad	dministering oath	Printed name of officer administering oath	Title of officer administering oath	

#### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

19	THE TOTAL PLANTS OF			
	ERIC GARZA			
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$		
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.	SCHEDULE E: LOANS	\$		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,566.98		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O	н \$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$		
		·····		

## 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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1 1 OF 2	F1: 2 FILER NAME ERIC GARZA		3 Filer ID (Ethics Commission Filers)	
Date 02/24/2018	5 Payee name PEDRO GARCIA			
Amount (\$)	7 Payee address; City; State; Zip Code			
448.00				
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	EVENT EXPENSE	! <u> </u>	outside of Texas. Complete Schedule T.  in, TX, officeholder living expense	
EXPENDITURE	(EASTER EGGS FOR	Offect if Austi	in, TA, officendidel living expense	
	HUNT 2018)			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held	
Date	Payee name			
02/24/2018	FUNEXPRESS.COM			
Amount (\$)	Payee address; City; State; Zip Code			
\$486.00	4206 SOUTH 108TH ST			
<b>3400.00</b>	OMAHA NE			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	lacksquare EVENT EXPENSE $lacksquare$		kif travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense	
EXPENDITURE				
	HUNT 2018)			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/20/2018	FACEBOOK			
Amount (\$)	Payee address; City; State; Zip Code			
\$150.00				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	ADVERTISING EXPENSE		tside of Texas. Complete Schedule T, , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Advertising Expense
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Consulting Expense
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(redii Card Payment

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

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 2 OF 2 **ERIC GARZA** 4 Date 5 Payee name 02/19/2018 **GOOGLE** 6 Amount (\$) 7 Payee address; City; State; Zip Code \$200.00 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE **ADVERTISING EXPENSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Рауее пате Date 02/21/2018 GODADDY Amount (\$) Payee address; City; State; Zip Code \$259.99 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. PURPOSE ADVERTISING EXPENSE OF Check if Austin, TX, officeholder living expense EXPENDITURE (WEB SITE) Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/24/2018 GODADDY Amount (\$) Payee address; City; State; Zip Code \$74.99 Category (See Categories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas, Complete Schedule T. ADVERTISING EXPENSE OF Check if Austin, TX, officeholder living expense **EXPENDITURE** (DOMAIN NAMES) Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED