# Jonathan Gracia

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

		La Caracian Filozol	2 Total pages filed:
The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	13
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR  Hr  Jonath  NICKNAME  LAST  Cyacia	SUFFIX	OFFICE USE ONLY  Date Received  CAMERON COUNTY  DEPARTMENT OF ELECTIONS &  VOTER REGISTRATION
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	932 E. Van	GITY; STATE; ZIP CODE BUYEN ST , TX , 78520 BY	MAY 1.4 2018  RECEIVED
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER  (0756) 504 2211	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST  NO C  NICKNAME LAST	MI SUFFIX	Dale Processed
	Garza	Jr.	Date Imaged
7 CAMPAIGN FREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S	BUITE #; CHTY: STATE:	ZIP CODE
(Residence or Business)	Brownsuille,	TX, 48573	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (954) 544 2911	EXTENSION	
9 REPORT TYPE	July 15 30th day before	Evandori \$500 limit	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach GOR+FR)
10 PERIOD COVERED	Month Day Year 2 /27 / 2018	THROUGH 5	14 2018
11 ELECTION	ELECTION DATE  Month Day Year Primary  5 / 22 / 2018 Genera	Description	
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	Pat 2, PL 2.	PCT 2	PLZ.
	<b>GO T</b> C	PAGE 2	

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

14 C/OH NAME			iler ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE! OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	, and the second		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	1. TOTAL PLEDG	I POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 30000	
EXPENDITURE TOTALS	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 489.96	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 14,942.71	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2,7 43.30			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			
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.  YANIRA CELENE PENA-VALDEZ Notary Public, State of Texas Comm. Expires 12-28-2021				
Notary ID 124184408  Signature of Candidate or Officeholder				
AFFIX NOTARY STAM		ì	v	
Sworn to and subso	cribed before me,	by the said <u>Jonathan</u> Gracia to certify which, witness my hand and seal of office.	this the	
Paint	2 Vif	Yanira Peña - Valdel	Motar &	
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

### SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Co	mmission Filers)
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3000 °C
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	4. SCHEDULE E: LOANS		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL C	CONTRIBUTIONS	\$ 14942-71
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICA	\$	
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL F	UNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	) A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS. REFUNDS. AND CONTRIB	UTIONS	\$
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### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 4 Date 5 Full name of contributor \$ 5000 Employer (See Instructions) larbitralor Dykema Cox Smith law film Date Amount of contribution (\$) Gracia # 1000 g 4/19/18 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor ☐ out-of-state PAC (IO# Amount of contribution (\$) auria \$ 1000 m w. Price Brownsuille Principal occupation / Job title (See Instructions) Employer (See Instructions) Porery Oliveira + fisher UP Morney law Date Full name of contributor Out-of-state PAC (10#); Amount of contribution (\$) # 500 E 78520 Canales Rick law ( ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Travel Out Of District Printing Expense Salaries/Wages/Contract Labor Other (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Jonathan Gracia Brownsuille Herald 4 Date 5 Payee name 7 Payee address; City; State; Zip Code 1135 E. Van Buren ST \$14500 Brownsuille, Tr, 78520 (a) Category (See Categories listed at the top of this schedule) 8 \_\_\_\_ Check if travel outside of Texas Complete Schedule T. PURPOSE Check if Austin, TX. officeholder living expense OF EXPENDITURE A decortising Newspaper ad. Office held 9 Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Payee name 2/24/18 Santiago Quinteros City; State; Zip Code Amount (\$) 2205 Mirasol Auc. \$ 205.67 Brownsulle, Tr, 78520 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. **PURPOSE** Licheck if Austin, TX, officeholder living expense Adultisis **EXPENDITURE** Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Internel Payee address; City; State; Zip Code 2403 Avgusta Dr. Suite 850 Hov 57001 +X >7053 Category (See Categories listed at the top of this schedule) Descri Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF EXPENDITURE Aduations Website maintance. Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel In District Travel Out Of District Contributions/Donations Made By Printing Expense 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. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 5 Payee name 7 Payee address; City; State; Zip Code 1135 E. Van Buren 5+ Brown suille, TY, 78520 (b) Description 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder fiving expense EXPENDITURE News paper ad. Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Amount (\$) City; State; Zip Code Payee address; # 2000 Check if travel outside of Texas. Complete Schedule T. PURPOSE Adultising Expense OF \_\_\_ Check if Austin, TX, officeholder living expense EXPENDITURE Soisnase Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Venenica Cong City; State; Zip Code West monde \$1000 Brown swill T, 78526 Category (See Categories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense transportation Expense Gas Office sought Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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