# LAURA BETANCOURT

#### JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE/ MI OFFICE USE ONLY OFFICEHOLDER NAME Mrs. Laura Date Received **CAMERON COUNTY** NICKNAME LAST SUFFIX DEPARTMENT OF ELECTIONS **VOTER REGISTRATION** Betancourt ADDRESS / PO BOX; 4 CANDIDATE/ APT / SUITE #; CITY: STATE: ZIP CODE 1 6 2018 **OFFICEHOLDER** MAILING 100 Stillinger Dr. Brownsville TX 78521 **ADDRESS** Change of Address AREA GODE 5 CANDIDATE/ PHONE NUMBER EXTENSION OFFICEHOLDER (956) 546-6384 PHONE Receipt # Amount \$ MS / MRS / MR FIRST М CAMPAIGN TREASURER Mr. John Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Serra STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; ZIP CODE CAMPAIGN CITY: STATE: TREASURER **ADDRESS** 100 Stillinger Dr. Brownsville TX 78521 (Residence or Business) AREA CODE PHONE NUMBER CAMPAIGN EXTENSION TREASURER (956) 203-6608 PHONE 9 REPORT TYPE January 15 15th day after campaign treasurer appointment 30th day before efection Runoff (Officeholder Only) X July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR) 10 PERIOD Day Year COVERED THROUGH 25 / 2018 30 2018 ELECTION ELECTION TYPE # ELECTION Ďaν X Primary Month Year Runoff Other Description 6 2018 General Special OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Cameron County Court at Law No. 2 Cameron County Court at Law No. 2 **GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 2

			15 Filer ID (Ethics Commission Filers)
Laura L. Betancourt			
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	COMMITTEE ADDRESS	
	SPECIFIC	OUNIMIT TEE ADDIESS	
	f		
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			·
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH.	
TOTALS	PLEDGE	S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	ZED P
	2. TOTAL	POLITICAL CONTRIBUTIONS	
		THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 300.00
TOTALS		OLITICAL EXPENDITURES OF \$100 OR LESS,	\$ 1940.67
	UNLESS ITEMIZED TOTOLO?		
	4. TOTAL POLITICAL EXPENDITURES \$ 5838.69		
	Ψ 5836.09		
CONTRIBUTION	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 73.40		
BALANCE	OF REPO	DRTING PERIOD	\$ 73.40
OUTSTANDING	6. TOTAL PRINCIPAL AMOUNT OF ALL GUTSTANDING LOANS AS OF THE		
LOAN TOTALS		Y OF THE REPORTING PERIOD	¹n=   \$ 1260.00
18 AFFIDAVIT			
			perjury, that the accompanying report is
			ormation required to be reported by me
	PERLA C DIA		
Notal	ry Public, State of	Texas	2.12
Notary ID# 1268898B-4 Comm. Expires 07-17-2021			
Signature of Candidate or Officeholder			
AFFIX NOTARY STAMP	(CEALABONE		
AFFIXIVOTART STAWLE	73CACABOVE		
Sworn to and subscri	bed before me. b	y the sald Laura L. Betancourt	, this the 16th
day of July	4.6	o certify which, witness my hand and seal of office.	
day of 777 to certify writers, withess thy flatid and seal of diffice,			
Perla Diaz Notary Public			
-			
Signature of officer ad	ımınıstering <b>sau</b> l	Printed name of officer administering oath	Title of officer administering cath

## FORM JC/OH SUBTOTALS - JC/OH **COVER SHEET PG 3** FILER NAME 20 Filer ID (Ethics Commission Filers) Laura L. Betancourt SCHEDULE SUBTOTALS SUBTOTAL 21 NAME OF SCHEDULE AMOUNT X 1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) 300.00 \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) 3. X SCHEDULE E(J): LOANS (JUDICIAL) \$ 1260.00 4. 5. X \$ 3898.02 SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 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 \$ 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 Betancourt 4 Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC ID#:\_\_ 2/27/18 \$300.00 6 Contributor address; City: State: Zip Code 34 S. Coria 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) The Touchy Law Firm 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's job title Contributor's principal occupation 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 Amount of contribution (\$) out-of-state PAC iD#;\_\_\_ . Clty; State: Zlp Code Contributor address: Contributor's Job title Contributor's principal occupation 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.

LOANS (JUDICIAL) SCHEDULE E(J)			
The I	nstruction Guide explains how to complete thi	s form.	1 Total pages Schedule E(J):
2 FILER NAME La	aura Betancourt		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	ITEMIZED LOANS	\$	
5 Date of loan	7 Name of lender	G (ID#:)	g Loan Amount (\$) O.
6/25/18	Laura Betancourt		\$000000
6 Is lender a financial institution?	8 Lender address; City;	State; Zlp Code	10 Interest rate
Y (N)	100 Stillinger Dr. Brov	vnsville TX 78521	11 Maturity date
12 Lender's Principal	Occupation	13 Lender's Job Title	
Judge	(	Judge	
14 Lender's Employe	/Law Firm	15 Law Firm of lender's spot	use (If any)
Cameron C	ounty		
16 If lender is a child	law firm of parent(s) (if any)		
17 Description of Collateral . 18 Check if personal funds were deposited into political account (See Instructions)			
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)
	21 Guarantor address; City;	State; Zlp Code	-    -
		•	
	Mariant applicable 23 Guarantor's Principal Occupation 24 Guarantor's Job Title		
25 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's	spouse (If any)
27 If guarantor is a child, law firm of parent(s) (if any)			
	•	<b>L</b>	
		OPERING COLUMNIA DE LA LICE	hanker kan ker
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.			

#### 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
Gilt/Awards/Memorials Expense
Legal Services

Loan Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense
Transportation Equipment & Related Expenso
Travel in District
Travel Out Of District
Other feature a category and listed should

Candidate/Officeholder/Politica Gredit Card Payment	al Committee Legal Services Salames/V  The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
8	LAURA BETANCOURT		
4 Date	5 Payee name		
2/26/18	Laura Betancourt		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$100.00	100 Stillinger Dr. Brownsville TX 785		
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 EXPENDITURE	Transportation Expense	Ghack if Austin, TX, officeholder living expense	
	Transportation Exponse	gas	
a General to ONEVE divers	Candidate / Officeholder name	Office sought Office held	
9 Complete ONLY if direct expenditure to benefit G/OF		Omos sought Omeo Hold	
Dale	Payee name		
2/26/18	Abel Villarreal		
Amount (\$)	Payee address; City; State; Zip Code		
\$400.00	Harlingen Texas 78550		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	wages/Contract labor	Check if Austin, TX, officeholder living expense	
		early voting get out and vote	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
03/5/18	The Vermillion		
Amount (\$)	Payee address; City; State; Zip Code		
\$116.81	115 Paredes Line Rd. Brownsville TX	78521	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF		Check If travel outside of Texas, Complete Schedule T.	
EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense	
		meal with constituents	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	
expenditure to benefit C/OH			
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED	

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Loan Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

Cendidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)	
	The Instruction Guide explains how to	,	
1 Total pages Schedule F1	<b>.</b>	3 Filer ID (Ethics Commission Filers)	
8	Laura Betancourt		
4 Date	5 Payee name		
3/5/18	The Grafik Spot		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$173.20	1265 N. Expressway 83, Brownsville T	X 78586	
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 EXPENDITURE	Printing Expense	Check if Auslin, TX, officeholder living expense	
EVLENDILALITY	Printing Expense		
		signs	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held	
Dale	Payee name		
03/6/18	Wal-mart Supercenter		
Amount (\$)	Payee address; Clty; State; Zlp Code		
\$107.05	2205 Ruben M. Torres Blvd Brownsvi	lle TX 78520	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	055	Check if Auslin, TX, officeholder living expense	
EVLENDH AUF	Office overhead		
Market Control of the		office supplies	
Complete ONLY if direct expenditure to benefit C/Oi-	Candidate / Officeholder name	Office held	
Date	Payee name		
3/6/18	Restauracion y Poder Church		
Amount (\$)	Payee address; City; State; Zip Code		
\$400.00	1450 Inima I Zarata Ava - Brassman	:U_ TV 70504	
\$100,00	4150 Jaime J. Zapata Ave. Brownsv	T	
	Category (See Categories listed at the top of this schedule)	Description  Charlette and switches of Towns Committee Sales Arts T	
PURPOSE OF	Check If travel duiside of Texas, Complete Schedule T.		
EXPENDITURE	Donation	Check if Austin, TX, officeholder living expense	
		Donation	
Consider ONLY Malicet	Candidate / Officeholder name	Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		· Office adaptit	
	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 Foot/Beverage Expense Gilt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Oontract Labor Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Candidate/Officeholder/Politic			enter a category not listed above)
Gredit Card Payment	The Instruction Guide explains how to o	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer	r ID (Ethics Commission Filers)
8	Laura Betancourt		
4 Date	5 Payee name		
3/7/18	S&Q Printing		<u> </u>
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$388.61	2205 Mirasol St. Brownsville TX 7852		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if Austin, TX, office	
OF EXPENDITURE	Printing Expense	CHECK II AUSTIII, 1A, OINGE	HOOGE HALIER ashause
		Shirts	
O O	Candidate / Officeholder name	Office sought	Office held
9 Complete ONLY if direct expenditure to benefit C/OI			
Date	Payee name		
3/7/18	The Home Depot		
Amount (\$)	Payee address; City; State; Zip Code		· · · · · · · · · · · · · · · · · · ·
,,,			
\$100.61	605 W. Morrison Rd. Brownsville TX	/ 7852N	
Ψ ( 0 0 . 0 1	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texa	s. Complete Schedule T.
OF	-11	Check If Austin, TX, officel	holder living expense
EXPENDITURE	other		
		Sign Post Expense	
Complete ONLY If direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
exhaulting to patient over			
Date	Payee name		
3/8/18	Adolios		
Amount (\$)	Payee address; City; State; Zip Code		
\$855.22	2370 North St. Brownsville TX 78521		
·	Category (See Categories listed at the top of this schedule)	Description	, , , , , , , , , , , , , , , , , , , ,
PURPOSE		Check if travel outside of Texas	s, Complete Schedule T.
OF EXPENDITURE	Events Evnences	Check if Austin, TX, officel	holder living expense
EM DIVERTIONAL	Events Expenses		
		Event 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	

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Glit/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Folling Expense Printing Expense Salarias/Warns/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Gandidate/Officeholder/Politic		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	3 Filer ID (Ethics Commission Filers)
8	Laura Betancourt	
4 Date	5 Payee name	
3/9/18	Johnny Carinos	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$104.16	2600 US-77 Brownsville TX 78520	
B	(a) Category (See Calegories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, Complete Schedule T.
OF EXPENDITURE	Food/Beverage Expense	Check If Austin, TX, officeholder living expense
EXPENDITORE		
		meals for constituents
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/Ol	<b>-</b>	A CONTRACT OF THE CONTRACT OF
Date	Рауев пате	
3/14/18	Laura Betancourt	
Amount (\$)	Payee address; Clty; State; Zip Code	
¢400.00	100 Stillinger Dr. Brownsville TV 794	500
\$100.00	100 Stillinger Dr. Brownsville TX 78	520
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Check if Austin, TX, officeholder living expense	
EXPENDITURE	Food/beverage Expense	NA - la vittle
		Meals with constituents
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	1	
Date	Payee name	
Date	, ayouriamo	
3/19/18	Cameron County Bar Association	
Amount (\$)	Payee address; City; State; Zip Code	
· ···· V·r		
¢150.00	D.O. Pay 2066 - Province illo TV 70	2522
\$150.00	P.O. Box 3866 Brownsville TX 76	
Diame and	Category (See Categories listed at the top of this schedule)	Description  Check if travel outside of Texas. Complete Schedule 1.
PURPOSE OF		Check if Austin, TX, officeholder living expense
EXPENDITURE		and the state of t
	Donation	gol <b>∉</b> tournament
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH		-
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

## SCHEDULE F1

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

Advartising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholdor/Political Committee

Event Expense Fees Food/Beverage Expense Gilt/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 & Fielated Expense Travel in District Travel Out Of District

Contributions/Donations Made E Gandidate/Officeholder/Politics Credit Card Payment	al Committee Legal Services Salaries/V	Vages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to o	
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
8	Laura Betancourt	
4 Date	5 Payee name	
4/2/18	Laura Betancourt	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$100.00	100 Stillinger Dr. Brownsville TX 7852	20
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE		Check if travel outside of Texas, Complete Schedule 7.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
LAFLINDITOTIC	Food/Beverage Expense	
		meals with constituents
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
5/7/18	Best Buy	
Amount (\$)	Payee address; City; State; Zip Code	
\$115.81	2701 Pablo Kisel Blvd. Brownsville TX	K 78520
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, Complete Schedule T.
OF EXPENDITURE	Office Overhead	L Check If Auslin, TX, afficeholder living expense
		office supplies
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit G/OH		
		- Advantage - Adva
Date	Payee name	
0.10.0.14.0	H.E.B.	
6/22/18	The state of the s	
Amount (\$)	Payee address; City; State; Zip Code	7 . <i>1</i>
	2155 Paredes Line	Kuaa
\$252.35	British British	ownsville TX 78520
	Category (See Calegories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas, Complete Schedule T,
OF EXPENDITURE	Food/Beverage Expense	Check it Austin, TX, officeholder living expense
		Campaign Meeting
		Mediate Services
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	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 Glit/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 & Fielated Expense Travel in District Travel Out Of District

Contributions/Donations Made E Candidate/Officeholder/Politica Credit Card Payment	al Conmittee Legal Services Salaries/V	Vages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to a	
1 Total pages Schedule F1:		3 Filter ID (Ethics Commission Filers)
8 4 Date	Laura Betancourt  5 Payee name	
•		
2/26/18	Laura Betancourt 7 Payee address; City; State; Zip Code	The state of the s
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$220.00	100 Stillinger Dr. Brownsville TX 785	· · · · · · · · · · · · · · · · · · ·
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE		Checkif travel outside of Texas, Complete Schedule T.
OF EXPENDITURE	Food/Beverage Expenses	Check if Austin, TX, officeholder fiving expense
	1 Ood/Deverage Expenses	
		meals for early vote workers
9 Complete <u>ONLY</u> If direct expenditure to benefit C/Oi-	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
2/28/18	Veronica Cruz	
Amount (\$)	Payee address; Clty; State; Zip Code	
\$400.00	Brownsville TX 78	3520
T	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Toxas, Complete Schedule T.
OF		Check if Austin, TX, officeholder fiving expense
EXPENDITURE		Early Voting
	Wages/Contract labor	Get out and vote
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
2/28/18	IBC Bank	
Amount (\$)	Payee address; City; State; Zip Code	
40.25	1600 FM 802	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		Check If travel outside of Texas, Complete Schedule T,
OF EXPENDITURE	Food	Check If Austin, TX, officeholder living expense
CAFERDITORE	Fees	
		Bank Fees
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 CATEGORIES FOR BOX 8(a)**

Advertising Exponse
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Cancildate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

The Instruction Guide explains how to complete this form.  1 Total pages Schedule F1: 2 FILER NAME	Gontributions/Donations Made E Candidate/Officeholder/Politics Credit Card Payment		veense Travel Out of District Vages/Contract Labor Other (enter a category not listed above)
Bolie   5 Payee name   15 Payee name   1600 FM 802   160	Great Gard Payment	The Instruction Guide explains how to o	complete this form.
Society   Soci		2 FILER NAME	3 Filer 1D (Ethics Commission Filers)
Second	11		
\$ Amount (\$)		[ ]	
\$21.15  1600 FM 802 Brownsville TX 78526  (a) Category (See Owegories listed at the top of this activable)  PURPOSE OF EXPENDITURE    (a) Category (See Owegories listed at the top of this activable)   (b) Description   Check it ravel outside of Tavas, Camplete Schedule T.		and the second s	
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expenditure to benefit G/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		Candidate / Officeholder name	Office sought Office held
		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 Prinling Expense Salaries/Wages/Contract Labor

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

Candidate/Officeholder/Politica Gredit Card Payment	al Committee Legal Services Satarles (A The Instruction Guide explains how to c	Vages/Contract Labor Other (enter a category not listed above) complete this form.
1 Total pages Schedule F1:	A FILED NAME	3 Filer ID (Ethics Commission Filers)
8	Laura Betancourt	C Files to (Ethics commission Filesa)
	5 Payee name	
4 Date	-	
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\$18.30	1600 FM 802 Brownsville TX 78526	3
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
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