EDDIE TREVINO, JR.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filler ID (Ethics Commission Fillers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Ediberto NICKNAME LAST	M1 J. SUFFIX	OFFICE USE ONLY Date Received
	Eddie Trevino	Jr.	CAMERON COUNTY DEPARTMENT OF ELECTIONS VOTER REGISTRATION
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; Co	ownsville, Tx 78521	6: 336 CL 2 9 5018
Change of Address			BY CHAPL
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (956) 554-0683	EXTENSION	Date Hand delivered or Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$
TREASURER NAME	Mrs. Evangelina	SUFFIX	Date Processed
	Trevino		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	street address (no po box please); APT / SU 165 Calle Jacaranda, Browns		ZIP CODE
8 CAMPAIGN TREASURER PHONE	area code phone number (956) 459-8177	EXTENSION	
9 REPORT TYPE	January 15 a0th day before ele	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 Sth day before elec	Stion Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month Day Yea <i>r</i>	Month	Day Yoar
COVERED	09 / 28 /2018	THROUGH 10 /	27 / 2018
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary 11 06 2018 X General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Cameron County Judge		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE! OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 65.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 21,275.00
EXPENDITURE TOTALS		OLITICAL EXPENDITURES OF \$100 OR LESS,	\$
	4. TOTAL I	POLITICAL EXPENDITURES	\$ 64,3 75.19
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 35,111.3		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ 70,000.00
18 AFFIDAVIT			·
_		I swear, or affirm, under penalty of perjui	
1	SAN JUANITA WOLFE	true and correct and includes all informa under Title 15, Election/Code.	tion required to be reported by me
I Ser A 15 3	y Notary ID # 122774 Expires March 20, 202	01 (1)	an interest of the second seco
98.4	Expires Maior	- Which	on and the same of
		Signature of Candida	e or Officeholder
AFFIX NOTARY STAME	P/SEALABOVE		
Sworn to and subscr	ibed before me, b	y the said Eddie Trevino J/	, this the
day of Colobor		o certify which, witness my hand and seal of office.	
San Juanul	a wooh	San Juanta Wolfe N	Wary Rublic
Signature of officer a	ummistering 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	Commission Filers)
Edd	die Trevino, Jr.	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 21,275.00
2,	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,098.22
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 70,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 64,375.19
6.	\$	
7.	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 750.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	- \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Eddie Trevino, Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) ut-of-state PAC (ID#:_ 9/30/2018 Jack McClelland \$ 250.00 6 Contributor address; City; State; Zip Code 2614 W. Freddy Gonzalez, Drive, Edinburg Tx 78539 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) LANDCO Developer Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Border Health PAC 9/30/2018 \$ 10,000.00 City; State; Zip Code Contributor address; 612 W. Nolana Bldg. 300, Ste 340, McAllen, Texas 78504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) 10/2/2018 Mark A. Johnson \$ 500.00 Contributor address; City; State; Zip Code P.O. Box 5898, Brownsville, Texas 78520 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Investor Date Full name of contributor out-of-state PAC (ID#; Amount of contribution (\$) Maria E. Solis 10/3/2018 \$ 500.00 Contributor address; City; State; Zip Code 1835 Don Quixote, Brownsville, Texas 78521 Principal occupation / Job title (See Instructions) Employer (See Instructions) Brownsville Children's Clinic Office Manager ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONE.	TARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1	
The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:	
2 FILER NAME Eddie Trev	no, Jr.		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
10/4/2018	Hodge Shergold, LLP 6 Contributor address: City; State; Zip C	, , , Gode	\$ 100.00	
	1534 E. 6th St., Ste 105, Brownsville Te	xas 78520		
8 Principal occu Attorney	pation / Job title (See Instructions) 9 Emp	oloyer (See Instruc	tions)	
Date	Full name of contributor 🔲 aut-al-state PAC (ID#:		Amount of contribution (\$)	
10/8/2018	Hospitalist Services of South Texas LLC	;		
10/0/2010	Contributor address; City; State; Zip C	Code	\$ 250.00	
	4068 Trinity Trl, Brownsville, Texas 785	20		
Principal occup	pation / Job title (See Instructions) Emp	oloyer (See Instruc	tions)	
Physician A	ssistant			
Date	Full name of contributor 🔲 out-of-state PAC {ID#:		Amount of contribution (\$)	
10/8/2018 Juan C. Del Angel				
	Contributor address; City; State; Zip Code \$2,500.00			
	2307 Silverado S., Palmhurst Texas 785	573		
		oloyer (See Instruc Engineering	tions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	
10/8/2018	Angela CH Guillen		\$ 100.00	
10/0/2010	Contributor address; City; State; Zip Co		φ 100.00	
	9055 Boca Chica Blvd., Brownsville, Tex	kas 78521		
Principal occup Business of	` '	oloyer (See Instruc	tions)	
	ATTACH ADDITIONAL COPIES OF THIS S If contributor is out-of-state PAC, please see instruction gu			

MONE	TARY POLITICAL CONTRI	IBUTIONS	schedule A1	
The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:	
2 FILER NAME Eddie Trevi	no, Jr.		3 Filer ID (Ethics Commission Filers)	
4 Date		C (ID#:)	7 Amount of contribution (\$)	
10/8/2018	Joe D. De La Fuente 6 Contributor address: City; State 1681 E. Los Ebanos, Brownsville,	`	\$100.00	
8 Principal occu Realtor	pation / Job title (See Instructions)	9 Employer (See Instruc Re/Max Sun Valle		
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)	
10/10/2018				
	Contributor address; City: State 57 Shadow Brook Ln., Brownsvill	e, Texas 78521	\$75.00	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)	
10/10/2018	\$ 50.00			
	1335 Coral Ct., Brownsville, Texa	is 78520		
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct	itions)	
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)	
10/10/2018	Romeo and Linda Montalvo	; Zíp Code	\$ 500.00	
	864 Central Blvd., Ste 2200, Brow	vnsville, Tx 78520		
Principal occup Physician	ation / Job title (See Instructions)	Employer (See Instruct Self	ions)	
	ATTACH ADDITIONAL CODICS O	ETUIO COLIEDIU E ACAI	:EDED	
	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 A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Eddie Trevino, Jr. 5 Full name of contributor 4 Date 7 Amount of contribution (\$) out-of-state PAC (ID#:___ \$ 500.00 10/11/2018 Mike McClelland 6 Contributor address; City; State; Zip Code P.O. Box 2728, Harlingen, Texas 78551 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) \$ 750.00 10/13/2018 Julie Uhlhorn Allen Contributor address; City; State; Zip Code 2601 S. 77, Sunshine Strip, Harlingen, Tx 78550 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Owner** Full name of contributor Date Dut-of-state PAC (ID#:_ Amount of contribution (\$) \$ 750.00 10/13/2018 Martha S. Uhlhorn City; State; Zip Code Contributor address: 2601 S. 77 Sunshine Strip, Harlingen, Tx 78550 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Owner** Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ 10/13/2018 Tudor Uhlhorn Contributor address; City; State; Zip Code \$1,000.00 2601 S. 77 Sunshine Strip, Harlingen, Texas 78550 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Owner** 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 A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Eddie Trevino, Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) ut-of-state PAC (ID#:_ Michael F. Scaief 10/15/2018 \$ 300.00 6 Contributor address: City; State; Zip Code P.O. Box 1064, San Benito, Texas 78586 Employer (See Instructions) 8 Principal occupation / Job title (See instructions) 9 Employer (See Instructions) Texas Regional Bank Banker Dout-of-state PAC (ID#:_____ Full name of contributor Date Amount of contribution (\$) . The Green Law Firm, P.C. \$1,000.00 10/16/2018 Contributor address; City; State; Zip Code 34 S. Coria, Brownsville, Texas 78520 Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney Full name of contributor Date ut-of-state PAC (ID#:__ Amount of contribution (\$) \$ 500.00 10/16/2018 C. Frank Wood City; State; Zip Code Contributor address; 3505 Boca Chica Blvd. Ste. 100, Brownsville, Tx Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorney Self Amount of contribution (\$) Date Full name of contributor ut-of-state PAC (ID#: 10/10/2018 Robert Gracia Contributor address; City; State; Zip Code \$ 500.00 P.O. Box 4953, Brownsville, Texas 78523 Employer (See Instructions) Principal occupation / Job title (See Instructions) Businessman Self 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 A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 0 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Eddie Trevino, Jr. 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#:____ \$50.00 10/20/2018 Claudia Barrera 6 Contributor address: City; State; Zip Code 2805 S. Clifford Dr. Harlingen, Texas 78550 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:__ Date Amount of contribution (\$) \$ 1,000.00 10/23/2018 Joe L. Lopez Contributor address; City; State; Zip Code 2 Conquistador Drive Brownsville, Texas 78520 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Financial Services Full name of contributor out-of-state PAC (ID#:____ Date Amount of contribution (\$) City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#:____ City; State; Zlp Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) 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 CONTRIBUTIONS

SCHEDULE A2

-				
Th	e Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:	
² FILER NAME Eddie Trev			3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	
5 Date 6 Full name of contributor			8 Amount of 9 In-kind contribution description \$516.11 Meet & Greet Check if travel outside of Texas. Complete Schedule T.	
10 Principal occi Consultant	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
	Full name of contributor out-of-state PAC (ID#: Mark Stiamac Contributor address; City; State; Zip Co. 519 Zapata Ave., Rancho Viejo, Tx		Amount of . In-kind contribution description \$1,357.11	
Consultant	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Aranza II	er (FOR NON-JUDICIAL)(See Instructions) nt Properties, LLC	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	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 T		· · · · · · · · · · · · · · · · · · ·	

Revised 9/8/2015

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

			the state of the s
Th	ne Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2:
² FILER NAME Eddie Trevino, Jr.			3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor		8 Amount of 9 In-kind contribution Contribution \$ description
10/10/2018	Evangelina Trevino 7 Contributor address; City; State; Zip Cod		\$ 1,090.00
	365 Calle Jacaranda, Brownsville, Tex	as 78520	Check if travel outside of Texas. Complete Schedule T.
10 Principal occ Retired	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	or (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (If any) (FOR JUDICIAL)		
Date 10/20/2018	Full name of contributor		Amount of In-kind contribution Contribution \$ description \$ 55.00 Meet and Greet
	Contributor address: City; State; Zip Cor 24078 Russell Lane, Harlingen, Tx 785		Check if travel outside of Texas. Complete Schedule T.
Principal occ Retired	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Cantributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firn	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
			Area - Ar
			,
(f	ATTACH ADDITIONAL COPIES OF T contributor is out-of-state PAC, please see instruction	HIS SCHEDI 1 guide for a	JLE AS NEEDED idditional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2:	
² FILER NAME Eddie Trevino, Jr.				3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	3UTI	ONS	\$	
5 Date 6 Full name of contributor out-of-state PAC (ID#:) 10/24/18 Humberto Barrera 7 Contributor address; City; State; Zip Code 1421 White Oak, Harlingen TX			~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	8 Amount of 9 In-kind contribution Contribution \$ description \$ 80.80	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11	Employe	er (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13	Contribu	itor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description	
	Contributor address; City; State; Zip Cod	 de			
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employe	er (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 T	THIS	SCHEDU	JLE AS NEEĎED	
l f	contributor is out-of-state PAC, please see instruction	iun n	ide for a	dditional reporting requirements.	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 9/8/2015

SCHEDULE B PLEDGED CONTRIBUTIONS 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 4 TOTAL OF UNITEMIZED PLEDGES \$ 5 Date 6 Full name of pledgor 8 Amount . 9 In-kind contribution out-of-state PAC (ID#:_ of Pledge \$ description 7 Pledgor address; City; State; Zip Code Check if travel outside of Texas, Complete Schedule T. 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions) Date Amount In-kind contribution Full name of pledgor ut-of-state PAC (ID#:_ of Pledge \$ description Pledgor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution Full name of pledgor ut-of-state PAC (ID#:_ Pledge \$ description City; State; Zip Code Pledgor address; Check if travel outside of Texas, Complete Schedule T. Employer (See Instructions) Principal occupation / Job title (See Instructions) In-kind contribution Amount of Full name of pledgor Date ut-of-state PAC (ID#:_ description Pledge \$ Pledgor address: City; State; Zip Code Check if travel outside of Texas, Complete Schedule T. Employer (See Instructions) Principal occupation / Job title (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

SCHEDULE E LOANS Total pages Schedule E: The Instruction Guide explains how to complete this form. 1 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Eddie Trevino, Jr. \$ 4 TOTAL OF UNITEMIZED LOANS 9 Loan Amount (\$) out-of-state PAC (ID#:__ Date of loan 7 Name of lender Eddie Trevino, Jr. 70.000.00 5/10/2016 10 Interest rate Is lender 8 Lender address; City; State; Zip Code a financial Institution? 2200 Boca Chica, Ste. 102, Brownsville, Texas 78521 11 Maturity date 13 Employer (See Instructions) 12 Principal occupation / Job title (See Instructions) Trevino & Bodden Attorney 15 Check if personal funds were deposited into political 14 Description of Collateral account (See Instructions) X x none 17 Name of guarantor 19 Amount Guaranteed (\$) 16 GUARANTOR INFORMATION City; State; Zip Code 18 Guarantor address; not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Loan Amount (\$) Date of loan Name of lender out-of-state PAC (ID#:_ Interest rate State: Zip Code Is lender City; a financial Institution? Maturity date Ν Employer (See Instructions) Principal occupation / Job title (See Instructions) Check if personal funds were deposited into political Description of Collateral account (See Instructions) none Amount Guaranteed (\$) **GUARANTOR** Name of guarantor INFORMATION Guarantor address; City; State: Zip Code not applicable Employer (See Instructions) Principal Occupation (See Instructions) 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 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 c	complete this form.
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevino, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2018	5 Payee name TRTA District 1	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$ 100.00	9003 Cornell Drive, Laredo, Texas 7	8045
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sponsorship AD	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Eddie Trevino, Jr. Cameron Col	unty Judge Cameron County Judge
Date	Payee name	
9/28/2018	Jose Luis Doniaz	
Amount (\$)	Payee address; City; State; Zip Code	
\$300.00	7593 Agave Ave., Brownsville, Texas	s 78526
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Flying Pig BBQ Sponsor Supplies	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/OF	Candidate / Officeholder name H Eddie Trevino, Jr. Cameron County	Office sought Office held y Judge Cameron County Judge
Date	Payee name	
9/28/2018	Flying Pig	
Amount (\$)	Payee address; City; State; Zip Code	
\$ 75.00	7197 Burnias St., Olmito Texas 785	575
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	BBQ Registration	Check if ravel 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 - Eddie Trevino, Jr. Cameron Col	Office sought Office held Unity Judge Cameron County Judge
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expanse Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Ol Food/Beverage Expense Po Y Gift/Awards/Memorials Expense Pr al Committee Legal Services Se	pan Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense rInting Expense alaries/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 h	ow to complete this form.	B. Fil. 175 Phil. B. L. Fried
1 Total pages Schedule F1:	Eddie Trevino, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2018	5 Payee name Leslie Gower		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$ 1,990.00	2019 N. Conway, Mission, Tex	(as	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categorias listed at the top of this sched	Check if travel ou	utside of Texas. Complete Schedule T. n. TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Cameron	Office sought n County Judge Cal	Office held meron County Judge
Date	Payee name		
9/28/2018	Claudia Rivera		
Amount (\$)	Payee address; City; State; Zip C	Gode	
\$ 280.00	3155 E. 26th St., Brownsville	e, Texas 78520	
-	Category (See Categories listed at the top of this sched	. —	ulside of Texas, Complete Schedule T.
PURPOSE OF EXPENDITURE	Phone Banking		nside of lexas, Complete Schedule 1. o, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Cameron	Office sought County Judge C	Office held Cameron County Judge
Date	Payee name		
10/1/2018	Brownsville Border Lions		
Amount (\$)	Payee address; City; State; Zip C	Dode	
\$ 125.00	P.O. Box 6217, Brownsville, 7	Гехаѕ 78523	
PURPOSE	Category (See Categories listed at the top of this sched	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE	Tournament T-Box Sponsor	Check of Austin	n, TX. officeholder living expense
Complete CASSAS ST.	Candidate / Officeholder name	Office sought	Office held
Complete ONLY If direct expenditure to benefit C/OH		County Judge	Cameron County Judge
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES F	OR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fees Office Overl Food/Beverage Expense Polling Expense Printing Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
Credit Gard Payment	The Instruction Guide explains how to co	implete this form.	
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevino, Jr.		3 Fifer ID (Ethics Commission Filers)
⁴ Date 10/1/2018	5 Payee name SMKT		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$2,000.00	30 Providencia Ct., Brownsville, T	exas 78526	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Social Media, Political Advertising	r	outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Eddie Trevino, Jr. Cameron Cou	Office sought Inty Judge	Office held Cameron County Judge
Date	Payee name		
10/2/2018	Cameron County Democratic Party		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 5,000.00	P.O. Box 4647, Brownsville, Texas	s 78523	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution		outside of Texas. Complete Schedule T. in, TX, afficeholder living expanse
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Eddie Trevino, Jr. Cameron Cou	Office sought unty Judge	Office held Cameron County Judge
Date	Payee name		, and the second
10/4/2018	Cobbleheads Bar & Grill		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 363.59	3154 Central Blvd., Brownsville, Te	exas 78520	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Event		ouside of Texas. Complete Schedule T. tin, TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Eddie Trevino, Jr. Cameron Cou	Office sought Inty Judge	Office held Cameron County Judge
	ATTACH ADDITIONAL COPIES OF THIS:	SCHEDULE AS NE	EDED

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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Salaries/Wages/Contract Labor 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 Eddie Trevino, Jr. 12 4 Date 5 Payeename 10/4/2018 Leslie Gower City; State; Zip Code 6 Amount (\$) 7 Payee address; \$ 2,000.00 2019 N. Conway, Mission Texas (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T, PURPOSE **Phone Banking** Check If Austin, TX. officeholder living expense OF EXPENDITURE Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/4/2018 Leslie Gower Payee address; City; State; Zip Code Amount (\$) 2019 N. Conway, Mission, Texas \$1,930.00 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF Phone Banking EXPENDITURE Office held Candidate / Officeholder name Office sought Complete ONLY If direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/5/2018 Knights of Columbus Payee address; City; State; Zip Code Amount (\$) 1701 E. Harrison Ave., Harlingen, Texas 78550 \$100.00 Category (See Categories listed at the top of this schedule) Description Check if traval outside of Texas. Complete Schedule T. PURPOSE OF Check if Austin, TX. afficeholder living expense EXPENDITURE Ad Sponsor Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	EXPENDITURE CATEGOR	RIES EOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Los Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Pri	an Repayment/Reimbursement ice Ovorhead/Rental Expense Iling Expense nting Expense tarles/Wages/Contract Labor	Solicitation/Fundralsing 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 Eddie Trevino, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/5/2018	5 Payee name Claudia Rivera		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$ 250.00	3155 E. 26th St., Brownsville	e, Texas 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched: Phone Banking	Check if travel of	outside of Texas. Complete Schedule T. In, TX. officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Camero	Office sought on County Judge	Office held Cameron County Judge
Date	Payee name		
10/5/2018	Brownsville Beerfest		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$ 200.00			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schede	Check if travel of	outside af Texas. Complete Schedule T. in, TX, afficeholder flying expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Ca	Office sought meron County Jud	Office held dge Cameron County Jud
Date	Payee name		
10/5/2018	BMG		
Amaunt (\$)	Payee address; City; State; Zip C	ode	
\$14,182.21	P.O. Box 5686, Brownsville,	Texas 78523	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Campaign Advertising	Check if travel of	ouiside al Texas. Complete Schadule T. iin, TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Cameron	Office sought County Judge C	Office held Cameron County Judge
	ATTACH ADDITIONAL COPIES OF		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Legal Services

Loan Repayment/Relmbursement Office Overhead/Rental Expense Palling Expense

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

Printing Expense Salaries/Wages/Contract Labor Contributions/Donations Made By Gift/Awards/Memorials Expense Other (enter a category not listed above) Candidate/Officeholder/Political Committee 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 Eddie Trevino, Jr. 5 Payeename 4 Date 10/5/2018 Bigo's Bar & Grill 7 Payee address; City; State; Zip Code 6 Amount (\$) 464 Paredes Line Rd., Brownsville, Texas 78521 \$ 178.73 (b) Description (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 Campaign Lunch EXPENDITURE Block walkers Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OlEddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/9/2018 International Monarch Design City; State; Zlp Code Payee address; Amount (\$) \$350.00 801 E. Fern Ave., McAllen, Texas Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. PURPOSE Check if Austin, TX, afficeholder living expense OF Advertising EXPENDITURE Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/11/2018 **BMG** Payee address; City; State; Zip Code Amount (\$) P.O. Box 5686, Brownsville, Texas 78523 \$2,040.00 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, oificeholder living expense OF EXPENDITURE Newspaper Ads Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

		EXPENDITURE CATE	GORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics	Fe Fo Sy Gi	rent Expense res od/Beverage Expense ft/Awards/Memorials Expense rgal Services	Office Over Polling Exp Printing Exp		Sollcitation/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 explai	ns how to co	mplete this form.	-	
1 Total pages Schedule F1:	2 FILER NAM Eddie Tre				3 Filer ID (Ethics Commission Filers)	
4 Date 10/12/2018	5 Payee name Leslie Go					
6 Amount (\$)	7 Payee addre	ess; City; State; 2	Zip Code			
\$3,967.50	2019 N.	Conway, Mission,	Texas			
8 PURPOSE OF EXPENDITURE	(a) Category (Se	ee Calegories listed at the top of this Banking	schedule)		utside of Texas, Complete Schedule T. n. TX. officeholder living expense	
9 Complete ONLY If direct expenditure to benefit C/O	н	/Officeholder name	ron Cou	Office sought	Office held Cameron County Judge	
Date	Payee name					
10/12/2018	City of Br	ownsville				
Amount (\$)	Payee addre	Payee address; City; State; Zip Code				
\$ 100.00	1001 E.	1001 E. Elizabeth St., Brownsville, Texas 78520				
PURPOSE OF EXPENDITURE	Category (Se	ee Categories listed at the top of this	schedule}		utside af Texas. Complete Schedule T. n, TX, afficeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF		/ Officeholder name vino, Jr. Camero	on Coun	Office sought ty Judge C	Office held ameron County Judge	
Date	Payee name	•				
10/13/2018	Vermil	lion				
Amount (\$)	Payee addre	ess; City; State; 2	Zlp Code			
\$219.01	115 Pare	des Line Rd., Brov	wnsville	Texas 78520)	
PURPOSE OF EXPENDITURE	Category (Se Campaig Block wa		schedule)		utside of Texas. Complete Schedule T. n, TX. afficeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		/ Officeholder name vino, Jr. Camer	on Cour	office sought oty Judge (Office held Cameron County Judge	
	ATTAC	CH ADDITIONAL COPIES	OF THIS	CHEDULE AS NE	EDED	
		the second secon			Davissa Molant	

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

Contributions/Donations Made B Candidate/Officeholder/Politica		vages/Contract Labor Other (enter a category not (isled above)
Credit Card Payment	The Instruction Guide explains how to d	complete this form.
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevino, Jr.	3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2018	5 Payee name BSPA	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$ 200.00		
8	(a) Category (See Calegories listed at the top of this schedule)	(b) Description
PURPOSE	Latin Jazz Festival Sponsor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX. officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	^ተ Eddie Trevino, Jr. Cameron Cou	inty Judge Cameron County Judge
Date	Payee name	
10/16/2018	Cameron County Democratic Part	ty
Amount (\$)	Payee address; City; State; Zip Code	
\$ 3,000.00	P.O. Box 4647, Brownsville, Tex	as 78520
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE		Check if travel outside of Texas. Complete Schadule T. Check if Austin, TX, officeholder living expense
OF EXPENDITURE	Contribution	T Check it Ausgri, 17, unicenducer living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Eddie Trevino, Jr. Cameron Cou	nty Judge Cameron County Judge
Date	Payee name	
10/18/2018	Cameron County Democratic Part	ty
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	P.O. Box 4647, Brownsville, Texa	as 78520
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF		Check if travel outside of Toxas, Complete Schedule T.
EXPENDITURE	Contribution	Check if Austin, TX. afficeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF		unty Judge Cameron County Judge
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

	EX	PENDITURE CAT	EGORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donatlons Made B Candidate/Officeholder/Politica Credit Card Payment	y Gift/Awa Il Committee Legal Sc	· verage Expense rds/Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travet In District Travet Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevin	o, Jr.			3 Filer ID (Ethics Commission Filers)	
⁴ Date 10/19/2018	5 Payee name BMG		, , , , , , , , , , , , , , , , , , , ,			
6 Amount (\$)	7 Payee address;	City; State;	Zip Code			
\$7,286.88	P.O. Box 5	686, Brownsvi	lle, Texa	s 78520		
8 PURPOSE OF EXPENDITURE	(a) Category (See Cate	(a) Category (See Categories listed at the top of this schedule) Advertising (b) Description Check If ravel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Eddie Trevin	ceholder name O, Jr.	Camero	n County Jud	ge Cameron County Judge	
Date	Payee name					
10/19/2018	Leslie Gowe	er				
Amount (\$)	Payee address;	City; State;	Zip Code			
\$1,627.50	2019 N. Con	way, Mission,	Texas			
PURPOSE OF EXPENDITURE	Category (See Cale	igories listed at the top of thi	s schedule)	—	tside of Texas. Camplete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Offi Eddie Trevin		ron Coui	Office sought nty Judge C	Office held Cameron County Judge	
Date	Payee name			1.000		
10/19/2018	Leslie Gow	er/er				
Amount (\$)	Payee address;	Clty; State;	Zip Code			
\$ 2,000.00	2019 N. Co	nway, Missior	n, Texas			
PURPOSE OF EXPENDITURE	Category (See Cate	igories listed al the top of lhi	s schedule)	$\overline{}$	utside of Texas. Complete Schedule T. I, TX, officeholder living expense	
Complete ONLY If direct	Candidate / Off			Office sought	Office held	
expenditure to benefit C/OF	Eddie Trevi	no, Jr. Ca	meron C	ounty Judge	Cameron County Judge	
	ATTACH A	DDITIONAL COPIE	S OF THIS S	CHEDULE AS NE		
		in the second se			Davis ad 0/0/0011	

	EXPENDITURE CATEGO	ORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Conations Made By Candidate/Officeholder/Political	Fees (Food/Beverage Expense (Gift/Awards/Memorials Expense (I Committee Legal Services (Loan Repayment/Reimbursament Office Overhead/Rental Expenso 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.			
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevino, Jr.	2	3 Filer ID (Ethics Commission Filers)		
4 Date 10/19/2018	^{5 Рауве патте} Tip of Texas Family Outrea	ch			
6 Amount (\$)	7 Payee address; City; State; Zip	Code			
\$ 300.00	455 E. Levee St., Brownsvil	lle, Texas 78520			
8	(a) Category (See Categories listed at the top of this sch				
PURPOSE			ulside of Texas, Complete Schedule T.		
OF EXPENDITURE	Sponsor	LJ Check if Austin	n. TX. officeholder living expanse		
D. Complete ONITY is already	Candidate / Officeholder name	Office sought	Office held		
Complete ONLY if direct expenditure to benefit C/OH		· ·	ameron County Judge		
Date	Payee name				
10/19/2018	Tip of Texas Family Outreac	:h			
Amount (\$)	Payee address; City; State; Zip Code				
\$ 55.00	455 E. Levee St., Brownsv	rille, Texas 78520			
	Category (See Categories listed at the top of this sch				
PURPOSE		<u> </u>	tside of Texas, Complete Schedule T.		
OF EXPENDITURE	Ticket for event	L Check if Austin	i, TX, officeholder living expense		
	Ticket for event				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr. Cameron (Office sought County Judge Carr	Office held neron County Judge		
Date	Payee name				
10/19/2018	Quality Print & Design				
Amount (\$)	Payee address; City; State; Zip	Code			
\$ 731.77	2165 US Military Hwy 281	Ste. C, Brownsville,	Texas 78520		
	Category (See Categories listed at the top of this sch		weigh of Tayan Complete Bahani in T		
PURPOSE OF	.	—	utside of Texas. Complete Schedulo T. n. TX, officeholder living expense		
EXPENDITURE	Signs	— Oligen ii Adalii	. .		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name B Eddie Trevino, Jr. Camero	Office sought on County Judge C	Office held ameron County Judge		
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS NE			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Consulting Expense Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense Travel Out Of District Other (enter a category not listed above) Printing Expense Salarles/Wages/Contract Labor Contributions/Donations Made By Gift/Awards/Memorials Expense Candidate/Officeholder/Polltical 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 Eddie Trevino, Jr. 5 Payee name 4 Date Dann Rivera 10/21/2018 City; State; Zip Code 7 Payee address; 6 Amount (\$) 5196 Sugar Mill Rd., Brownsville, Texas 78526 \$800.00 (b) Description (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 Get Out The Vote EXPENDITURE Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name 10/25/2018 **BMG** City; State; Zip Code Payee address; Amount (\$) P.O. Box 5686, Brownsville, Texas 78523 \$4,710.00 Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. PURPOSE Advertising Check if Austin. TX, afficeholder living expense OF EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/25/2018 Victoria Lozano City; State; Zip Code Amount (\$) Payee address; \$ 100.00 P.O. 1090, Rio Hondo, Texas 78583 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Taxas. Complete Schedule T. PURPOSE Sponsor Check if Austin, TX, officeholder living expense OF EXPENDITURE Office held Office sought Candidate / Officeholder name Complete ONLY If direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge 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 Loan Repayment/Reimbursement Office Overhead/Rental Exponse Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Gulde explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Eddie Trevino, Jr. 4 Date 10/25/2018 5 Payee name Warriors United in Arms City; State; Zip Code 6 Amount (\$) 7 Payee address; \$ 300.00 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF Sponsor EXPENDITURE Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/26/2018 Indira S. Bujanos Amount (\$) Payee address; City; State; Zip Code \$ 513.00 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. **PURPOSE** Trophies for event ___ Check if Austin, TX, afficeholder living expense EXPENDITURE Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge Payee name Date 10/26/2018 Jose Luis Gomez Amount (\$) Pavee address; City; State; Zip Code \$ 2,000.00 2888 Madrid Ave., Brownsville, Texas 78526 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense Contract Labor EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Cameron County Judge

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Polling Expense Travel In District Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F2: 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date 6 Payee name City; State; Zip Code 7 Amount (\$) 8 Payee address; TYPE OF Political Non-Political EXPENDITURE 10 (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 Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Office held Candidate / Officeholder name Office sought expenditure to benefit C/OH Payee name Date Amount (\$) Payee address; City; State; Zip Code TYPE OF Non-Political Political **EXPENDITURE** Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

ТІ	he Instruction Guide explains how to complete this form.	1 Total pages Schedule F3:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom investment is purchased	
	6 Address of person from whom investment is purchased; Cit	y; State; Zip Code
	7 Description of investment	
	8 Amount of investment (\$)	
Date	Name of person from whom investment is purchased	
,	Address of person from whom investment is purchased; City	
	Description of investment	
	Amount of investment (\$)	
- ti	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics	Committee Legal Services	Office Overhead Polling Expense Printing Expense Salaries/Wages/	o Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
Tatal wassa Cabadula Edu	The Instruction Guide explain	is now to compl	ete this form.	3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F4:	Eddie Trevino, Jr.			S Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED	TOACRED	IT CARD	\$
5 Date 10/21/2018	6 Payee name FaceBook			
7 Amount (\$)	8 Payee address; City; State;	Zip Code		
\$750.00	1601 Willow Rd., Bldg 10 Mer	nlo Park CA	N 94025-14	53
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10	(a) Category (See Categories listed at the top of thi	s schedule)	(b) Description	n
PURPOSE OF Expenditure	Advertising			travel outside of Texas, Complete Schedule T. f Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Ediberto "Eddie"Trevino, Jr.		_{sought} ty Judge	Office held County Judge
Date	Payee name			
Amount (\$)	Payee address; City; State;	Zip Code		
TYPE OF EXPENDITURE	Political	Non-Politica		
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of thi	s schedule)		on travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office	sought	Office held
		E TIMO O CUIT		
	ATTACH ADDITIONAL COPIES O	F THIS SCHE	DULE AS NE	FNFD

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 Gitt/Awards/Memorials Expense Legal Services 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 not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 7 Payee address; City; State; 6 Amount (\$) Zip Code Reimbursement from political contributions ntended (b) Description 8 (a) Category (See Categories listed at the top of this schedule) PURPOSE Check if travel outside of Texas, Complete Schedule T. OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date City; State; Zip Code Amount (\$) Payee address; Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Check if travel outside of Texas. Complete Schedule T. OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name City; State; Zip Code Amount (\$) Payee address; Reimbursement from political contributions intended (b) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

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)

Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	cal Committee Legal Services		Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule H:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
4 Date	5 Business name		
6 Amount (\$)	7 Business address; City; State; Z	üp Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this se	Check if travel outside of To	exas, Complete Schedule T. iceholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought	Office held
Date	Business name		
Amount (\$)	Business address; City; State; Z	Cip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so	Check if travel outside of Te	exas. Complete Schedule T. iceholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date	Business name		
Amount (\$)	Business address; City; State; Zi	ip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so	Check if travel outside of Te	exas. Complete Schedule T. iceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS NEEDE	ED

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SCHEDULE !

	The land of the control of the contr	whate this forms
	The Instruction Guide explains how to com	
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See Instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form. 1 Total pages Schedule K: 3 Filer ID (Ethics Commission File 4 Date 5 Name of person from whom amount is received 8 Amount	s)
	rs)
4 Date 5 Name of person from whom amount is received 8 Amount	
	(\$)
6 Address of person from whom amount is received; City; State; Zip Code	
7 Purpose for which amount is received	
Date Name of person from whom amount is received Amount	(\$)
Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received Check if political contribution returned to filer	
Date Name of person from whom amount is received Amount	(\$)
Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received Check if political contribution returned to filer	
Date Name of person from whom amount is received Amoun	t (\$)
Address of person from whom amount is received; City; State; Zip Code	
Purpose for which amount is received Check if political contribution returned to filer	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instr	uction Guide	explains	how to complete th	is form.	1 Total pages Schedule T:	
2 FILER NAME					3 Filer ID (Ethics Commis	ssion Filers)
4 Name of Contributor	/ Corporation	or Labor (Organization / Pledgor /	Payee		
5 Contribution / Expend	diture reported	l on:				
Schedule A2		dule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2		edule F4	Schedule G	Schedule H	Schedule COH-U	
Scriedule F2		edule F4	Scriedule G		Scriedule COH-OC	J □ Scriedale B-SS
6 Dates of travel	7 Nameo	f person(s) traveling			
	8 Departui	re city or r	ame of departure locat	ion		
	9 Destinati	ion city or	name of destination lo	cation		
10 Means of transportat	lion	11 Purpo	ose of travel (including	name of conference, s	seminar, or other event)	····
Name of Contributor	/ Corporation	or Labor (Organization / Pledgor /	Payee		
Contribution / Expend	diture reported	on:				
Schedule A2	_	dule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2	Sche	edule F4	Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS
Dates of travel	Dates of travel Name of person(s) traveling					
	Departu	re city or r	ame of departure locat	ion		
	Destinati	ion city or	name of destination lo	cation		
Means of transporta	Means of transportation Purpose of travel (including name of conference, seminar, or other event)					
Name of Contributor	/ Corporation	or Labor (Organization / Pledgor /	Payee		
Contribution / Expend	fiture reported	on:				
Schedule A2	,	dule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1
Schedule F2		edule F4	Schedule G	Schedule H	Schedule COH-UC	
				Scrieddie H		, C Schedule 5-33
Dates of travel	Name o	r person(s) traveling			
	Departur	e city or r	ame of departure locat	ion		
	Destinati	on city or	name of destination lo	cation		
Means of transportat	ion	Purpo	ose of travel (including	name of conference, s	seminar, or other event)	
	ТА	TACH AI	DDITIONAL COPIES	OF THIS SCHEDUL	E AS NEEDED	

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete this form Complete only if "Report Type" on page 1 is marked "Final Report"
1	C/OH N	NAME 2 Filer ID (Ethics Commission Filers)
3	SIGNA	TURE
	ing a re	expect any further political contributions or political expenditures in connection with my candidacy. I understand that designat- port as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign utions or make any campaign expenditures without a campaign treasurer appointment on file. Signature of Candidate / Officeholder
		Olgitala, Co. Callanato, Chiachia.
4		WHO IS NOT AN OFFICEHOLDER uplete A & B below <i>only</i> if you are not an officeholder. ••
	A.	CAMPAIGN FUNDS
	Chec	k only one:
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.
	В.	ASSETS
	Chec	k only one:
		I do not retain assets purchased with political contributions or interest or other income from political contributions.
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.
		Signature of Candidate
5		EHOLDER plete this section <i>only</i> if you are an officeholder ··
		I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.
		Signature of Officeholder