LINDA SALAZAR



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 25/4602215	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR FIRST LINDA NICKNAME LAST SALAZAR	MI M SUFFIX	OFFICE USE ONLY Date Received CAMERON COUNTY DEPARTMENT OF ELECTIONS
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; COMPANY SAN AN A	EXTENSION	VOTER REGISTRATION JAN 1 4 2019 RECEIVED BY: Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST RICHARD E, Z NICKNAME LAST	2 A G A S SUFFIX	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 950 E. VAN BROWNSU; LLE, AREA CODE PHONE NUMBER (956) 546-50	BUREN STREE TEXAS 1852 EXTENSION	
9 REPORT TYPE	July 15 30th day before electrical and the state of the s		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
OPERIOD COVERED	Month Day Year 07 / 01 / 18	THROUGH /2	Day Year 31 18
11 ELECTION	ELECTION DATE Month Day Year Primary 03 / 01 / 16 General	ELECTION TYPE Runoff Other Description Special	
2 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (If known) THE STICE PCT.	OF THE PEACE 2-1
	GO TO I	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	IPA I	M.	SA	LAZA	R	15 Filer	ID (Ethics (Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANI	DIDATE / OF	FICEHOLDER. 7	THESE EXPENDITE	PTED OR POLITICAL EXPERIENCE PTED MAY HAVE BEEN MADE ARE REQUIRED TO REPORT	: WITHOUT TH	IE CANDIDATE	s or officeholder's
	COMMITTEE TYPE	COMMIT	TTEE NAME					
	GENERAL							
	SPECIFIC	COMMIT	TEE ADDRESS	3				
		СОММІТ	TEE CAMPAIG	N TREASURER	NAME		-	
Additional Pages								
		COMMIT	TEE CAMPAIG	N TREASURER	ADDRESS			
17 CONTRIBUTION TOTALS					O OR LESS (OTHER T OANS), UNLESS ITEN		\$ /	90.00
			CAL CONTR LEDGES, LO		RANTEES OF LOANS;)	\$ 12,	150,00
EXPENDITURE TOTALS		POLITICA S ITEMIZE		URES OF \$10	0 OR LESS,		\$ / /	139.88
	4. TOTAL	POLITIC	CAL EXPENI	DITURES			\$ 2,	933.87
CONTRIBUTION BALANCE		OLITICA ORTING		TIONS MAINT	AINED AS OF THE LAS	ST DAY	\$ 10,	633.48
OUTSTANDING LOAN TOTALS			L AMOUNT C IE REPORTIN		ANDING LOANS AS OI	FTHE	\$ -	0-
18 AFFIDAVIT								
				true and c	affirm, under penalty o prrect and includes all in a 15, Election Code.			· ·
	Cynthia Rodrig lotary Public, State Viy Comm. Exp. 11/2	of Texas 21/2021		Ha.	Signature of Ca	2. Sandidate o	Ja r Officebolo	larger
	Notary ID 129629	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Oignature of Of	anologie o	Officerion	
AFFIX NOTARY STAM			/ >	100	SALAZA	R		14 44
Sworn to and subscr day of TANNA					nd and seal of office		this the	/ 4
10- 11- N	2 ndi non	.5 56(11)	, which, we	(a) a	And sear or office	∵. . 11\1⊼	James	Dullis
Signature of officer a	dministering bath) P	rinted name	of officer adr	ON GUZ	Title	of officer	dministering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME . 20 Fi	iler ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$12,150.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$12,150,00 \$1700,00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	ITIONS \$ 2,933.87
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRI	IBUTIONS \$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINE	ESS OF C/OH \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	ITIONS \$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

			· · · · · · · · · · · · · · · · · · ·
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	UDA M. SALAZA	R .	3 Filer ID (Ethics Commission Filers) 25/46022/5
4 Date 07-13-18	5 Full name of contributor out-of-state PAC LALY'S BAIL BOND 6 Contributor address; City; State; 844-B M:L: +Any HW BROWNSVILLE, TEXAS	/5 ; Zip Code /g 2 8/	7 Amount of contribution (\$) 5 1, 000.
8 Principal occu	pation / Job title (See Instructions) - Business	9 Employer (See Instruct	ilons)
Date	Full name of contributor 🔲 out-of-state PAC	(ID#:)	Amount of contribution (\$)
09-04-18	Jesus R. Canales Contributor address; City; State; 848 E. HARRISON STRO BROWNSUILLE, TEXAS	i	\$500.00
· · · · · · · · · · · · · · · · · · ·	pation / Job title (See Instructions) 4 ORNEY	Employer (See Instruct	ions)
Date 09-04-18	Full name of contributor out-of-state PAC ROERIG, OLIVEIRA, FIS, Contributor address; City; State; 855 W. PRICE Rd. Swit BROWNSVILLE, TEXAS	Hen. Zip Code	Amount of contribution (\$)
	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 09-06-18	Full name of contributor out-of-state PAC Taime + Amanda PAC Contributor address; City; State; 4374 MARTINAL Rd. BROWNSVILLE, TEXAS	ARRA ; Zip Code	Amount of contribution (\$)
Principal occup Bus i	nation / Job title (See Instructions) NRSS - FRIENDS	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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) LINDA M. SALAZAR 25 14602218 4 Date 5 Full name of contributor out-of-state PAC (ID#: 09-06-18 DiANNE + KEVIN TSBell 6 Contributor address; City; State; Zip Code 1641 RESACA Vig. BROWNSUILLE, TEXAS. 8 Principal occupation / Job title (See Instructions) Business - Friends - Donation 9 Employer (See Instructions) out-of-state PAC (ID#: 09-0618 Luis AREVALO Amount of contribution (\$) \$ 500. CD Contributor address: City; State; Zip Code 28010 Roberta Rd. SAN Benito, TEXAS 78586 Principal occupation / Job title (See Instructions) Employer (See Instructions) BusiNess- Donation Full name of contributor | out-of-state PAC (ID#: Date Amount of contribution (\$) 09-13-18 HAPRY THOMAS Contributor address; City; State; Zip Code 4380. BOCA CHICA BWD A3 \$150.00 #380, DOCA CMICA 75-3/ BROWNSUICLE, TEXAS 7852/ Employer (See Instructions) Principal occupation / Job title (See Instructions) Business - Friend - Lotenin Sales For 09-09-18 Date Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) R. CALARA Contributor address; City; State; Zip Code 8 2 6 CROCKett ROAD HARLINGEN, TEXAS 18552 Employer (See Instructions) Basinass - Friend - Ponation \$ 200. 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) LINDA M. SALAZAR 2514602215 5 Full name of contributor 4 Date 7 Amount of contribution (\$) 5 Full name of contributor Stuart OWEN 6 Contributor address; City; State; Zip Code 3665 Contrib St. Suite D-5 5200.00 19-12-18 BROWNSUILLE, TEXAS 785-20 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Business - Loteria Saler 09-09-18 Full name of contributor out-of-state PAC (ID#:____ Date Amount of contribution (\$) 09-12-18 J. + A. De LA FARZA Contributor address: City; State; Zip Code 6/3 PARK LAND DR. \$200.00 BROWNSUILLE, TEXAS 78521 Principal occupation / Job title (See Instructions) Employer (See Instructions) Trcketa For LoteRia on 09/09/18 Full name of contributor ____ out-of-state PAC (ID#:__ Amount of contribution (\$) 09-12.18 Leticia B. EsoBedo contributor address; City; State; Zip Code 2808 HACKBORRY LANE \$350.E BROWNSVILLE, TEXAS 7852 / Principal occupation / Job title (See Instructions) Employe Employer (See Instructions) DONATIONS BUSINESS Date Amount of contribution (\$) 09-12-18 LoteRiA Fundraiser Contributor address; City; State; Zip Code 4434 E. 147H STREET \$1,100,00 Principal occupation / Job title (See Instructions) FOR September 09, 2018 City, State, 2ip Code Rate, 2ip Code Employer (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 M. SALAZAR INDA 5146022/5 4 Date 7 Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (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.

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 LINDA M. SALAZAR 2514602215 5 Full name of contributor ___ out-of-state_PAC (ID#:__ 7 Amount of contribution (\$) 19-28-18 A Belando Gomez 6 Contributor address: City; State; Zip Code 6595 Parades Line \$200,00 BROWNSVILLE, Texas 78520 8 Principal occupation / Job title (See Instructions) 7 icket's Sales for Loteria on 09/09/18 Fundammen on 09/09/18 Amount of contribution (\$) 10-01-18 Luis Fernando ELizondo Contributor address; City; State; Zip Code 1774 OLD CREEK Ct. \$ 500,00 BROWNSVILLE, TEXAS 78521 Principal occupation / Job title (See Instructions) Business - Donafrion Employer (See Instructions) Date Amount of contribution (\$) Contributor address; City; State; Zip Code 657 SPRINS mant Blud. \$ 500 00 10-18-18 BROWNSVILLE, TEXAS 78526 Principal occupation / Job title (See Instructions) Employer (See Instructions) Business - Donation. Date Amount of contribution (\$) LALy's BAIL Bonds Contributor address; City; State; Zip Code 844-B millitary HWY 281 \$ 100.00 10-18-18 BROWNSVILLE, TEXAS 7852/ Principal occupation / Job title (See Instructions) Fundam Tickets Sales 08, 2018 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	A M. SALAZAK	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Out-of-state PAC (ID#:) NOEM! TORRE 6 Contributor address; City: State; Zip Code 4 PALO ALTO DRIVE BROWNSUICLE, TEXAS 1853/	7 Amount of contribution (\$)
	pation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date 0-18\ 8	Full name of contributor out-of-state PAC (ID#:) MARIA GUADA LUPE TORRE CONLEY Contributor address; City; State; Zip Code 3022 ABERDEEN PR. BROUNS VILLE, TEXAS 18526	Amount of contribution (\$) \$\frac{4}{200}\$
Principal occup	ation / Job title (See Instructions) For fundame For Sales Novembr 08, 2018 Employer (See Instructions)	tions)
Date /0-/8-/8	Eder Hernnadez Contributor address: City; State; Zip Code 2534 BOCA CHICA Blud. STE 7 BROWN SUILLE, TEXAS 1852/	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions) Find No. Fundam November 08, 2018 Employer (See Instructions)	tions)
Date /0-18-19	Full name of contributor	Amount of contribution (\$)
	ation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) ON - Campaign Fun draise ON - Campaign Fun draise	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NI	EEDED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
LIND	A M. SALAZAR	2514602215
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
	MARIA Guadalupe Torne Conte	. ,0
10-18-18	6 Contributor address: City; State; Zip Code 3022 ABERDEN DRIVE	\$ 100.00
8 Principal occu	BROWNSVILLE, TEXAS 78523 pation / Job title (See Instructions) Fox 9 Employer (See Instruc	tions)
Ticket	a Sale Fundraise 11/08/18	·
	Full name of contributor	
Date	<u> </u>	Amount of contribution (\$)
11-21-18	Eddie Lucio	\$200.
•	Contributor address; City; State; Zip Code 834 T9LeR Sナ・	7200.
	BROWNSUILLE, TEXAS 78520	
	pation / Job title (See Instructions) Employer (See Instruc	,
A++	ORNEY	3
Date	Full name of contributorout-of-state_PAC (ID#:)	Amount of contribution (\$)
	ISBELA BOTELLO	. 00
11-01-18		\$ 400.00
	4685 Jaime J, ZAPATA	, , -
Principal conur	BROWNSUILLE, TEXAS 78521 pation / Job title (See Instructions)	diana\
Finicipal occup	pation / Job title (See instructions) Dration - Fundaise For October 26, 2018	Suoma/
	FOX 00:10-00 24, 2016	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
11-14-18	Fundraiser For November 08,201	
,,	Contributor address; City; State; Zip Code 1355 Military Highway	5 2,100.
٩	BROWNSUILLE TEXAS 28520	,
Principal occup	pation / Job title (See Instructions) Fundame Employer (See Instruc	otions)
Tic	BROWNSVILLE, TEXAS 78520 pation / Job title (See Instructions) Fundamen Employer (See Instructions) Ket Sales November 08, 2018	
	•	
	·	
	•	

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 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

Candidate/Officeholder/Politi		Travel Out Of District Salaries/Wages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1 4 Date	The Instruction Guide explains 2 FILER NAME LINDA M. SA 5 Payee name	LAZAR 3 Filer ID (Ethics Commission Filers) 2-5-14602215
08-10-18 6 Amount (\$) \$\frac{133.65}{3.65}	5 A m '2 7 Payee address: City: State; Zig 3570 W. AL+C BROWNSU; LLE, 7	ON 6COOR
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Solan Water, Ponation - Campaism Lote in	(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/O	Candidate / Officeholder name H	Office sought Office held
Date 08/29/18	Payee name 5Am'z	
Amount (\$) \$\frac{1}{3}74.92	Payee address: City; State; Zip 3570 W. AL7 BROWNS VI'LLE,	TEXAS 78520
PURPOSE OF EXPENDITURE	Soda's, Water, Plat for Campaign Lotenia	edule) Description Check if travel outside of Texas, complete Schedule T
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/28/18	Payee name UN Limited PRi	u tins
Amount (\$)	Payee address: City; State; Zip & A685 N. CORIA S BROWNSVILLE, TE	tneet Ste A-1
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheel Campaign Poster + Ticket's for Fundamental Campaign for Fundamental Category (See Categories listed at the top of this scheel Campaign).	dulo)
Complete <u>ONLY</u> 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 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 (extenses a set leave used lifety in the content of the conten

Sandado Onceriolerii oliaci	1032,00,000	Salaries/Wages/Contract Labor explains how to complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME LINDA M.	SALAZAR	3 Filer ID (Ethics Commission Filers) 25/46022/5
4 Date 10-17-18	5 Payee name 4 Imprint		017600013
6 Amount (\$) \$366.17	7 Payee address: City; State 25303 Nefwork CHiCASO, ILL.	60673-125	-3
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of Apple Stness R. Donationi for Sca	of this schedule) (h) Description	ravel outside of Texas, complete Schedule T Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	t Office held
Date ///02/18	Payee name ENGRAVING AW	ands GiFts	
Amount (\$)	Payee address: City: State 42 FRANKLIN LACONIA, NA		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of Pencile Edwartion Bon Schools	f this schedule) Description Check if tra	avel outside of Texas, complete Schedule T ustin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date /0-3/-/8	Payee name Krispy Kreme	e	
Amount (\$) \$\(\frac{140.29}{}\)	Payee address: City: State 1144 E. FM 80 BROWNSUICLE,	76 X AS 1852	L
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of the Constitution of	this schedule) Description Check if tray	vel outside of Texas, complete Schedule T stin. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS NE	EEDED

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 set listed to be

Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 2514602215 LINDA M. SALAZAR
5 Payee name 4 Date //-06-/8 6 Amount (\$) 5 A m s

7 Payee address; City: State; Zip Code

7 5 7 0 11 A 1 + 0 11 6 GLOOR W. ALTON 5 261.24 BROWNSVILLE, TEXAS 78520 (a) Category (See categories listed at the top of this schedule)

Campaign Worker's

Water, Soda's (b) Description Check if travel outside of Texas, complete Schedule T PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name H.E.B. 11-19-18 Amount (\$) Payee address: City; State; Zip Code

2250 BOCA CHICA Blud. 5149.21 BROWNSVILLE, TEXAS

Category (See categories listed at the top of this schedule)

Donations PURPOSE Check if travel outside of Texas, complete Schedule T Check if Austin. TX, officeholder living expense Turkey EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 6 LONIG GON 2ALEZ 12-03-18 Amount (\$) Payee address: City; State; Zip Code
3552 WARNICK LANG BROWNSVILLE, TEXAS 18520
Category (See categories listed at the top of this schedule)

Description Description Tamales for Eldin PURPOSE Check if travel outside of Texas, complete Schedule T 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

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 Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	The Instruction Guide explains how to	complete this form.	(and a sategory not instead above)
1 Total pages Schedule F1	LINDA M. SALA	3	Filer ID (Ethics Commission Filers)
4 Date 11/30/18	Cameron County Em		
\$ /00.00	7 Payee address: City: State; Zip Code 1100 E. MONROE BROWNSVILLE, TEX	Street	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) CHRIST-MAST PARTY CAMERON COUNTY	(b) Description Check if travel outs	side of Texas, complete Schedule T X, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name DH	Office sought	Office held
Date / 2 - 0 8 - 18	Payee name BROWNSUILLE	Museum	OF FINE ART
Amount (\$) 5200.00	Payee address: City: State: Zip Code 660 E. Ringgold BROWNSUILLE, TEXI	STREET AS 7852	.0
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Asposit for Campaign Fundiaise For March 19, 2019	Description Check if travel outsid	de of Texas, complete Schedule T officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date /2 -/5-/9	Payee name SAM'R		
Amount (\$) \$\frac{5}{3}\$56.59	Payee address: City: State: Zip Code 3570 W. QL+ON BROWNSVILLE: Tex	Gloor sas 1852	0
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) PONTION FOR CHRISTMAN 6:67. (CHUNCH)	Description Check if travel outside	e of Texas, complete Schedule T officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Git/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

Total pages Schedule F1: Z FILER NAME		The Instruction Guide explains how	other (enter a category not listed about complete this form.	ve)
Samount Samo	1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission	Filers
### Payee address: City: State: Zip Code #### Payee name #### Payee address: City: State: Zip Code #### Payee name #### Payee name #### Payee name #### Payee address: City: State: Zip Code #### Payee name #### Payee address: City: State: Zip Code #### Payee name ##### Payee name ###### Payee name ###################################	Date	5 Pavee name		<u> </u>
### STREET Apt. 3/03 ### STREET Apt. 3/03 ### BROWN SUILLE, TEXAS 78 \$ 20 (a) Category (See categories listed at the top of this schedule) (b) Description Check if favor Judicial of Texas, complete Schedule TEXPENDITURE Candidate / Office-holder name Chipselfor Complete Schedule TEXPENDITURE Candidate / Office-holder name Office sought Office held	12-19-18	NORMA (ORTE	2_	
Category (See categories listed at the top of this schedule) Description Check if ravel outside of Texas, complete Schedule Total Check if austin, TX officeholder living expense		7 Payee address: City: State; Zip Code 250 AsH Stres	et apt. 3103	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Complete		(a) Category (See categories listed at the top of this schedule)		
EXPENDITURE Tam a Les For CHristman Camplete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Office sought Office held Office	PURPOSE		F	
Camplete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Office sought Office held				
Complete QNLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Office sought Office held	EXI ENDITORE		TAX Unicerioider living expense	
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Office held Date Payee name Amount (\$) Payee address; City; State; Zip Code PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name	Complete ONLY if direct	Candidate / Officeholder name	Office growth	
Purpose OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name City: State; Zip Code Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder fiving expense	expenditure to benefit C/OH		Office held	
PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	Date	Payee name		
PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense			. *	
PURPOSE OF EXPENDITURE Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	Amount (\$)	Payee address; City; State; Zip Code		
EXPENDITURE Check if Austin. TX. officeholder fiving expense Complete ONLY if direct Candidate / Officeholder name		Category (See categories listed at the top of this schedule)	[
omplete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held				
	omplete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Ti	he Instruction Guide explains how to complete this for	rm,	1 Total pages Schedule A2:
FILER NAM	- · · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
LIND	A M. SALAZAR	·	2514602215
TOTAL O	OF UNITEMIZED IN-KIND POLITICAL CONTRI	IBUTIONS	\$
Date 9/09/18	6 Full name of contributor out-of-state PAC (ID#:	20	8 Amount of 9 In-kind contribution description Food For Loteria Funda
	BROWNSVILLE, TEXAS 7	18521	ON 09/09/18 Check if travel outside of Texas. Complete Schedule
U Principal occi	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
2 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	itor's job title (FOR JUDICIAL) (See Instructions)
4 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution
9-09-18	Jaime PARRA Contributor address; City: City: State; Zip Co 4374 MARTING L Rd. BROWN SUILLE, TEXAS 785		Amount of In-kind contribution Contribution \$ description TV 60 n Lofenia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T
9-09-18 Principal occu	Jaime PARRA Contributor address; City; State; Zip Co 4374 MARTING L Rd.	26 Employe	Contribution \$ description 5 400, 400 TV 60 n Loteria Funda ON 09/09/18
9-09-18 Principal occu Bus	Taime Parra Contributor address; City; State; Zip Co 4374 MARTING C Pd. BROWN SUILLE, TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions)	26 Employe	Contribution \$ description TV 60 n Lofenia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T
9-09-18 Principal occu Bus Contributor's	Taime Parra Contributor address; City: State; Zip Co 4374 MARTING L Rd. BROWN SVILLE, TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe Contribu	Contribution \$ description TV 60 n Lotenia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T r (FOR NON-JUDICIAL) (See Instructions)
9-09-18 Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE, TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
9-09-18 Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)
Principal occu Bus Contributor's	Contributor address; City: State; Zip Co 4374 MAR+inc L Rd. BROWNSVILLE TEXAS 785 upation / Job title (FOR NON-JUDICIAL) (See Instructions) principal occupation (FOR JUDICIAL) employer/law firm (FOR JUDICIAL)	Employe Contribu	Contribution \$ description \$ 400. Loferia Funda ON 09/09/18 Check if travel outside of Texas. Complete Schedule T If (FOR NON-JUDICIAL) (See Instructions) Since Since Since Since Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form	1 Total pages Schedule A2:	
FILER NAME	3 Filer ID (Ethics Commission Filers)	
LINDA M. SALAZAR		2514602215
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
Date 6 Full name of contributor out-of-state PAC (ID#:	6 Full name of contributor out-of-state PAC (ID#:	
9-19-18 EmiliANO GONZALEZ		Contribution \$ description TV FOR Cotenia Fund
7 Contributor address; City; State; Zip Code 701 SUNRISE BIND. BROWNSVILLE, TEXAS 785		Check if travel outside of Texas. Complete Schedule
	11 Employe	er (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)		tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution Contribution \$ description
-08-18 ERIC SANCHEZ Contributor address; City; State; Zip Code 1355 Military Highway		5 300. Fundaire on Hovembro8, 20 Food & Beverge
DROWNSUILLE, IEXAS 1852	0	Check if travel outside of Texas. Complete Schedule
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer Busin en	r (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)		or'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)		1

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 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) LINDA M. SALAZAR 2514602215 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution O9-09-18 Roberto HANA 7 Contributor address; City; State; Zip Code 815 PARedes Line Rd. BROWNSUILLE, TEXAS 7852/ Check if travel outside of Texas. Complete Sci 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) 11 Employer (FOR NON-JUDICIAL) (See Instructions) Check if travel outside of Texas. Complete Schedule T. BusiNess BUSINESS 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See Instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Contribution \$ Jessica Tetreau KaliFA Contributor address; City; State; Zip Gode 725 PARedes Line Rd. 09-09-18 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Employer (FOR NON-JUDICIAL) (See Instructions) Employer (FOR NON-JUDICIAL) (See Instructions) Business BUSINESS Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See Instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:
FILER NAM			3 Filer ID (Ethics Commission Filers) 25/46022/5
TOTAL C	OF UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$
Date 9-09-18	6 Full name of contributor out-of-state PAC (ID#: PRISCILLE Serva 7 Contributor address; City; State; Zip Contributor address; Street 425 E. 10 TH STREET BROWN SUILLE, TEXAS	de	8 Amount of 9 In-kind contribution description Contribution \$ description GO G
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIAL) (See Instructions)
! Contributor's	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 of contributor's spouse (if any) (FOR JUDICIAL)	
			in or contributor's spouse (if any) (FOR JUDICIAL)
	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		in of contributor's spouse (if any) (FOR JODICIAL)
Date	Full name of contributor out-of-state PAC (ID#: ARTURO MARTINEZ Contributor address; City; State; Zip Coc 2500 N. Express WAY BROWNSUILLE. TEXAG 78		Amount of In-kind contribution description Sizo. Loteria Funda Loteria Funda
Date 3-/9-/8 Principal occ	Full name of contributor Uout-of-state PAC (ID#:	526 Employe	Amount of In-kind contribution description Contribution \$ description \$ 20 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Date 3-/9-/8 Principal occ	Full name of contributor out-of-state PAC (ID#: ARTURO MARTINEZ Contributor address; City; State; Zip Coc 2500 M. Express WAY BROWNSU; LLE, TEXAS 78 upation / Job title (FOR NON-JUDICIAL) (See Instructions)	526 Employe	Amount of In-kind contribution Contribution \$ description \$ 20 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Date 3-/9-/8 Principal occ 13 a Contributor's	Full name of contributor out-of-state PAC (ID#:	526 Employe <i>B</i> 9 Contribu	Amount of In-kind contribution Contribution \$ description \$ description \$ \$ 20.
Date 3-/9-/8 Principal occ Bu Contributor's	Full name of contributor out-of-state PAC (ID#: ARTURO MARTINEZ Contributor address; City; State; Zip Coc 2500 W. Express WAY BROWNSUILLE, TEXAS 78 upation / Job title (FOR NON-JUDICIAL) (See Instructions) 51 NR 55 principal occupation (FOR JUDICIAL)	526 Employe <i>B</i> 9 Contribu	Amount of In-kind contribution Contribution \$ description \$ 20
Date 3-/9-/8 Principal occ /// Contributor's Contributor's	Full name of contributor out-of-state PAC (ID#:	526 Employe <i>B</i> 9 Contribu	Amount of In-kind contribution Contribution \$ description \$ 20.

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

	1 Total pages Schedule A2:	
The Instruction Guide explains how to complete this for	rm. Total pages Schedure A2.	
LINDA M. SALAZAR	3 Filer ID (Ethics Commission Filers) 25/46022/5	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRI	IBUTIONS \$	
5 Date 6 Full name of contributor out-of-state PAC (ID#:	— — — — — — — — — — — — — — — — — — —	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date Full name of contributor out-of-state PAC (ID#:) Amount of . In-kind contribution Contribution \$. description	
Contributor address; City; State; Zip Coo	ode Check if travel outside of Texas. Complete Schedule	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	

Forms provided by Texas Ethics Commission