

**ESTELA**

**CHAVEZ-**

**VASQUEZ**

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 2em; font-family: cursive;">28</span>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <span style="font-size: 1.5em; font-family: cursive;">Esfela</span> NICKNAME LAST SUFFIX <span style="font-size: 1.5em; font-family: cursive;">Chavez Vasquez</span>	<b>OFFICE USE ONLY</b>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE ZIP CODE <span style="font-size: 1.2em; font-family: cursive;">810 W. Ocean Blvd Ste C2 Los Fresnos, TX 78564</span>	Date Received <div style="text-align: center;">CAMERON COUNTY DEPARTMENT OF ELECTIONS &amp; VOTER REGISTRATION</div> <span style="font-size: 1.2em; font-family: cursive;">4:46pm</span> <span style="font-size: 1.2em; font-family: cursive;">JAN 16 2020</span> By: <span style="font-size: 1.5em; font-family: cursive;">[Signature]</span> Date Hand-Delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <span style="font-size: 1.2em; font-family: cursive;">(956) 434-9207</span>	Receipt #	Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <span style="font-size: 1.5em; font-family: cursive;">Ricardo</span> NICKNAME LAST SUFFIX <span style="font-size: 1.5em; font-family: cursive;">Sanchez</span>	Date Processed	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.2em; font-family: cursive;">810 W. Ocean Blvd. Ste C2 Los Fresnos, TX 78564</span>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <span style="font-size: 1.2em; font-family: cursive;">(956) 543-5715</span>		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year <span style="font-size: 1.5em; font-family: cursive;">07/01/2019</span> <span style="font-size: 1.5em; font-family: cursive;">12/31/2019</span>		
11 ELECTION	ELECTION DATE Month Day Year <span style="font-size: 1.5em; font-family: cursive;">/ /</span>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <span style="font-size: 1.5em; font-family: cursive;">Judge Cameron County Court #5</span>	13 OFFICE SOUGHT (if known)	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

14 JC/OH NAME Estela Chavez Vasquez 15 Filer ID (Ethics Commission Filers)

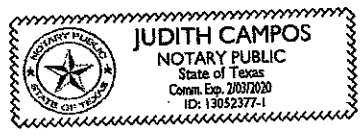
16 NOTICE FROM POLITICAL COMMITTEE(S)  
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ - 0 -
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ - 0 -
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,895.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 37,286.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ Note, 500

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Estela Chavez Vasquez  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Estela Chavez Vasquez, this the 16<sup>th</sup> day of Jan., 20 20, to certify which, witness my hand and seal of office.

Judith Campos Judith Campos Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**SUBTOTALS - JC/OH**

**FORM JC/OH  
COVER SHEET PG 3**

19 FILER NAME Estela Chavez Vasquez 20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 20,600 <del>00</del>
2. <input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,559.69
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ <del>20,600</del> <sup>see cv.</sup>
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 116,580
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,895 <del>00</del>
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 315.60
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ..... 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS  
(JUDICIAL)**

**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME Estela Chauver Vasquez		3 Filer ID (Ethics Commission Filers)
4 Date 8/22/19	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jesus R. Canales	7 Amount of contribution (\$) \$1,000 <sup>00</sup>
6 Contributor address; City; State; Zip Code 845 E. Harrison St. Brownsville, TX 78520		
8 Contributor's principal occupation	9 Contributor's job title	
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		
Date 8/22/19	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Beatrice Vela, O.D.	Amount of contribution (\$) \$500 <sup>00</sup>
Contributor address; City; State; Zip Code 3500 W. Alton Blvd Ste B Brownsville, TX		
Contributor's principal occupation Optometrist	Contributor's job title	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		
Date 8/27/19	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Raul A. Peña M.D., P.A.	Amount of contribution (\$) \$1,000 <sup>00</sup>
Contributor address; City; State; Zip Code 1400 S. Ridge Rd. #10 McAllen, TX		
Contributor's principal occupation Ophthalmologist	Contributor's job title Doctor	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS  
(JUDICIAL)**

**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Eslela Chavez Vasquez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>8/28/19</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Royston Rayzor, Vickery &amp; Williams LLP</i>	7 Amount of contribution (\$) <i>\$1,000<sup>00</sup></i>
6 Contributor address; City; State; Zip Code <i>55 Cole Circle Brownsville, TX</i>		
8 Contributor's principal occupation <i>Attorney</i>	9 Contributor's job title	
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>9/4/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Fernando Galvan</i>	Amount of contribution (\$) <i>\$150<sup>00</sup></i>
Contributor address; City; State; Zip Code <i>924 Belthair St. Brownsville</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law office of Fernando Galvan</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>9/5/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Reynaldo G. Garza III</i>	Amount of contribution (\$) <i>\$300<sup>00</sup></i>
Contributor address; City; State; Zip Code <i>4944 Lakeway Brownsville</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Estela Chavez Vasquez</i>		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rudy + Arda Garcia</i>	7 Amount of contribution (\$) <i>\$300<sup>00</sup></i>
	6 Contributor address; City; State; Zip Code <i>4230 Sol Ln. Brownsville, TX</i>	
8 Contributor's principal occupation <i>Nurse</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Doctors Hospital Renaissance</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/10/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Noemi Garcia Martinez</i>	Amount of contribution (\$) <i>\$1500<sup>00</sup></i>
	Contributor address; City; State; Zip Code <i>30 Providencia Ct. Ste 501 Brownsville</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Noemi Garcia Martinez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/11/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jose G. Sosa, FNP, PC</i>	Amount of contribution (\$) <i>\$500<sup>00</sup></i>
	Contributor address; City; State; Zip Code <i>11125 Arkansas Avenue Brownsville, TX</i>	
Contributor's principal occupation <i>Physician Assistant</i>		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

*Egyleta Chauver Vasquez*

3 Filer ID (Ethics Commission Filers)

4 Date

*9/11/19*

5 Full name of contributor

*Eder Francisco Hernandez*

out-of-state PAC ID#:

7 Amount of contribution (\$)

*\$250<sup>00</sup>*

6 Contributor address;

City; State; Zip Code

*1180 Ceiba Circle Brownsville, TX*

8 Contributor's principal occupation

*Physician Assistant*

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

*9/11/19*

Full name of contributor

*Aida Montanano Flores*

out-of-state PAC ID#:

Amount of contribution (\$)

*\$150<sup>00</sup>*

Contributor address;

City; State; Zip Code

*603 E. St. Charles Street Brownsville*

Contributor's principal occupation

*Attorney*

Contributor's job title

*Attorney*

Contributor's employer/law firm

*Montanano - Flores Law Firm*

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

*9/9/19*

Full name of contributor

*Gabriela Martinez*

out-of-state PAC ID#:

Amount of contribution (\$)

*\$300<sup>00</sup>*

Contributor address;

City; State; Zip Code

*1002 E. Taylor St. Brownsville TX 78520*

Contributor's principal occupation

*Attorney*

Contributor's job title

*Attorney*

Contributor's employer/law firm

*Law Office of Gabriela Martinez*

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS  
(JUDICIAL)**

**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Eslela Chavez Vasquez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/9/19</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Abel Delgadillo</i>	7 Amount of contribution (\$) <i>\$750<sup>00</sup></i>
	6 Contributor address; City; State; Zip Code <i>955 E. Tyler St. Brownsville, TX</i>	
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Abel Delgadillo</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/10/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Noe Alaniz</i>	Amount of contribution (\$) <i>\$150<sup>00</sup></i>
	Contributor address; City; State; Zip Code <i>P.O. Box 7080 San Benito, TX</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Noel Alaniz</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/11/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Salvador Garcia</i>	Amount of contribution (\$) <i>\$500<sup>00</sup></i>
	Contributor address; City; State; Zip Code <i>914 E. Van Buren St. Brownsville, TX</i>	
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm <i>Law Office of Salvador Garcia</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>Estela Chavez Vasquez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/12/19</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Dollie &amp; Jesus Lucto</i>	7 Amount of contribution (\$) <i>\$500<sup>00</sup></i>
6 Contributor address; City; State; Zip Code <i>Brownsville, TX</i>		
8 Contributor's principal occupation <i>Automotive Car Sales</i>		9 Contributor's job title <i>Owner</i>
10 Contributor's employer/law firm <i>English Motors</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/11/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Timothy Andrew Lopes</i>	Amount of contribution (\$) <i>\$300<sup>00</sup></i>
Contributor address; City; State; Zip Code <i>830 Acacia Lake Dr Brownsville, TX</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Timothy Lopes</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/10/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Devine Fitness, LLC</i>	Amount of contribution (\$) <i>\$300<sup>00</sup></i>
Contributor address; City; State; Zip Code <i>31270 State Hwy 100 Los Fresnos</i>		
Contributor's principal occupation <i>Educator</i>		Contributor's job title <i>Teacher</i>
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

out-of-state PAC ID#:

Edna Dinsdale

7 Amount of contribution (\$)

\$150<sup>00</sup>

6 Contributor address;

City; State; Zip Code

48 Casa De Amigos Brownsville

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Law Office of Edna Dinsdale

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#:

9/11/19

Fashion Posh LLC Fredi Guillen

Amount of contribution (\$)

\$500<sup>00</sup>

Contributor address;

City; State; Zip Code

117 E. Jackson St. Brownsville

Contributor's principal occupation

Contributor's job title

Owner

Contributor's employer/law firm

Fashion Posh

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#:

9/10/19

Anselmo Naranjo Jr.

Amount of contribution (\$)

\$300<sup>00</sup>

Contributor address;

City; State; Zip Code

140 N. Cuates Camino Los Fresnos

Contributor's principal occupation

Contributor's job title

Attorney

Attorney

Contributor's employer/law firm

Law Office of Anselmo Naranjo

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/12/19

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Rene Z. Barrera Laura Barrera

7 Amount of contribution (\$)

\$ 200<sup>00</sup>

6 Contributor address; City; State; Zip Code

2082 Deer Trail Brownsville, TX

8 Contributor's principal occupation

Electrician

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

9/11/19

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Law Office of Valerie M. Garcia

Amount of contribution (\$)

\$ 150<sup>00</sup>

Contributor address; City; State; Zip Code

8418 Summer View Ct. Harlingen

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Valerie M. Garcia

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

9/5/19

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Miguel Salazar

Amount of contribution (\$)

\$ 500<sup>00</sup>

Contributor address; City; State; Zip Code

30 Providence Ct. Ste 2 Brownsville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Miguel Salazar

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**MONETARY POLITICAL CONTRIBUTIONS  
(JUDICIAL)**

**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chauer Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/10/19

5 Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

JK Sun Valley Healthcare Associates

7 Amount of contribution (\$)

\$ 500<sup>00</sup>

6 Contributor address;

City; State; Zip Code

2185 N. Alton Glen Blvd Ste 1  
Brooklyn

8 Contributor's principal occupation

Doctor

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Jose W. Hernandez

Amount of contribution (\$)

\$ 500<sup>00</sup>

Contributor address;

City; State; Zip Code

1305 E. Nolana Ste F McAllen

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Jose W. Hernandez PLLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Ignacio Martinez

Amount of contribution (\$)

\$ 2,500<sup>00</sup>

Contributor address;

City; State; Zip Code

1205 N. Expressway Brownville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Ignacio G. Martinez Law Firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/6/19

5 Full name of contributor

out-of-state PAC ID#

Maria Linda Gonzalez, P.C.

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address;

City; State; Zip Code

777 S. Harrison St. Ft. Braensville

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Law Office of Maria Linda Gonzalez

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

9/5/19

Full name of contributor

out-of-state PAC ID#

J. A. Sosa Law PLLC

Amount of contribution (\$)

\$150.00

Contributor address;

City; State; Zip Code

100 E. St. Charles St. Ste 500 Braensville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

J. A. Sosa Law PLLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

9/4/19

Full name of contributor

out-of-state PAC ID#

Flor

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

Braensville, TX

Contributor's principal occupation

Builder

Contributor's job title

Owner

Contributor's employer/law firm

DJCCLO Cocinas + Closets Inc.

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Eslela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Albert Rodriguez

7 Amount of contribution (\$)

\$500<sup>00</sup>

6 Contributor address; City; State; Zip Code

945 E. Van Buren Brownsville, TX

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Rodriguez Lucha Law Group, PLLC

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

9/9/19

Enrique J. Solana

\$150<sup>00</sup>

Contributor address; City; State; Zip Code

914 E. Van Buren St. Brownsville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Enrique J. Solana

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

9/11/19

Rene Gomez

\$150<sup>00</sup>

Contributor address; City; State; Zip Code

847 S. Harrison St. Brownsville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Rene Gomez

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

4/1/14

5 Full name of contributor  out-of-state PAC ID#

Wike Fruvia Motors

7 Amount of contribution (\$)

\$500

6 Contributor address; City; State; Zip Code

2045 Barnard Rd. Brownsville

8 Contributor's principal occupation

Car Dealership

9 Contributor's job title

owners

10 Contributor's employer/law firm

Wike Fruvia Motors

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

4/1/14

Full name of contributor  out-of-state PAC ID#

Fred Kowalski

Amount of contribution (\$)

\$500

Contributor address; City; State; Zip Code

902 E. Madison St. Brownsville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Fred Kowalski

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor  out-of-state PAC ID#

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Esela Chauv Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/10/19

5 Full name of contributor

Michael Martinez

out-of-state PAC ID#:

7 Amount of contribution (\$)

\$150<sup>00</sup>

6 Contributor address;

City; State; Zip Code

30 Providencia Brownsville

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Michael Martinez Attorney at Law

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

9/5/19

Full name of contributor

Erin H. Garcia

out-of-state PAC ID#:

Amount of contribution (\$)

\$300<sup>00</sup>

Contributor address;

City; State; Zip Code

905 E. Los Ebanos Blvd

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Erin H. Garcia

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/17/19

Full name of contributor

Chester Z. Gonzalez

out-of-state PAC ID#:

Amount of contribution (\$)

\$1,000<sup>00</sup>

Contributor address;

City; State; Zip Code

117 E. Price Rd. Brownsville TX 78131

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Attorney + Counselor at Law

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME:

Eslela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Priscilla Niedwiedz

7 Amount of contribution (\$)

\$500<sup>00</sup>

6 Contributor address; City; State; Zip Code

905 E. Jackson St. Brownsville

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Law Office of Priscilla Niedwiedz

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

9/16/19

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Samuel T. Selena

Amount of contribution (\$)

\$150<sup>00</sup>

Contributor address; City; State; Zip Code

914 E. Van Buren St. Brownsville

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Samuel Selena

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

9/10/19

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Asim Zamir

Amount of contribution (\$)

\$500<sup>00</sup>

Contributor address; City; State; Zip Code

2100 W. San Marcelo Blvd #240

Contributor's principal occupation

Doctor

Contributor's job title

Doctor

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/12/18

5 Full name of contributor

Diego Naranjo

out-of-state PAC ID#:

7 Amount of contribution (\$)

\$250<sup>00</sup>

6 Contributor address;

832 Abrahamson Dr Brownville

City; State; Zip Code

8 Contributor's principal occupation

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

9/18/18

Full name of contributor

Enrique C. Juaraz

out-of-state PAC ID#:

Amount of contribution (\$)

\$250<sup>00</sup>

Contributor address;

PO Box 97 Los Fresnos, TX 78746

City; State; Zip Code

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Enrique Juaraz

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

9/4/19

Full name of contributor

Mara C. Martinez

out-of-state PAC ID#:

Amount of contribution (\$)

\$500<sup>00</sup>

Contributor address;

748 E. Van Buren St. Ste A

City; State; Zip Code

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Office of Mara C Martinez

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 FILER NAME

Esela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 Date

9/11/14

5 Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Juan Lopez or Ana C. Lopez

7 Amount of contribution (\$)

\$1500

6 Contributor address;

City; State; Zip Code

200 Zapata Ave Rancho Viejo

8 Contributor's principal occupation

Banker

9 Contributor's job title

Banker

10 Contributor's employer/law firm

BBVA Bank

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

11/11/14

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Luis S. Navarro

Amount of contribution (\$)

\$500

Contributor address;

City; State; Zip Code

2914 Huisache Edinburg TX

Contributor's principal occupation

Optometrist

Contributor's job title

Optometrist

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# 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

*Estela Chavez Vasquez*

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

*9/12/19*

6 Full name of contributor

*Judith Lucio*

out-of-state PAC (ID#: \_\_\_\_\_)

7 Contributor address; City; State; Zip Code

*805 Old Port Isabel Rd. Brownsville*

8 Amount of Contribution \$

*\$779.84*

9 In-kind contribution description

*venue decorations & food*

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

*Attorney*

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

*Attorney*

14 Contributor's employer/law firm (FOR JUDICIAL)

*Hamilton & Lucio, P.C.*

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

*Hamilton & Lucio, P.C.*

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

*9/12/19*

Full name of contributor

*Erick Lucio*

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

*805 Old Port Isabel Rd. Brownsville*

Amount of Contribution \$

*\$779.84*

In-kind contribution description

*venue decorations & food*

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

*Attorney*

Contributor's job title (FOR JUDICIAL) (See Instructions)

*Attorney*

Contributor's employer/law firm (FOR JUDICIAL)

*Hamilton & Lucio, P.C.*

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

*Hamilton & Lucio PC.*

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.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Estela Chavez Vasquez	<b>3</b> Filer ID (Ethics Commission Filers)
-----------------------------------	--	--

<b>4</b> Date 8/22/19	<b>5</b> Payee name CCBA Women's Law Section
--------------------------	---

<b>6</b> Amount (\$) \$1500	<b>7</b> Payee address; City; State; Zip Code Brownsville, TX
--------------------------------	--

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Sponsorship	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	--	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Estela Chavez Vasquez	Office sought	Office held CC#5
---	--	---------------	---------------------

Date 8/22/19	Payee name CCBA Women's Law Section
-----------------	--

Amount (\$) \$250	Payee address; City; State; Zip Code Brownsville, TX
----------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Sponsorship	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Estela Chavez Vasquez	Office sought	Office held CC#5
--	--	---------------	---------------------

Date 10/30/19	Payee name Moody Clinic
------------------	----------------------------

Amount (\$) \$1,500	Payee address; City; State; Zip Code 1401 E 22nd St. Brownsville, TX
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Estela Chavez Vasquez	Office sought	Office held Judge CC#5
--	--	---------------	---------------------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Esabella Chavez Vasquez	<b>3</b> Filer ID (Ethics Commission Filers)
-----------------------------------	--	--

<b>4</b> Date 11/4/19	<b>5</b> Payee name Charro Days Inc.
--------------------------	---

<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code Brownsville, TX
----------------------------------	--

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Parade Christmas	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 11/13/19	Payee name Cameron County Democratic Party
------------------	---

Amount (\$) \$1,500	Payee address; City; State; Zip Code Harlingen, TX
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Reelection filing fee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 7/5/19	Payee name Johnny Cuvaros
----------------	------------------------------

Amount (\$) 3,480.00	Payee address; City; State; Zip Code Los Presnes
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising sign Los Presnes	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	--	---

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**



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

**SCHEDULE H**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Feas                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME <i>Estela Chavez Vasquez</i>	3 Filer ID (Ethics Commission Filers)
---------------------------	--	---------------------------------------

4 Date <i>7/9/19</i>	5 Business name <i>Rio Bank</i>
-------------------------	------------------------------------

6 Amount (\$) <i>\$315.60</i>	7 Business address; City; State; Zip Code <i>3401 Old Hwy 77 Brownsville</i>
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Loan Repayment</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Estela Chavez Vasquez</i>	Office sought	Office held <i>Judge CCA#5</i>
---	---	---------------	-----------------------------------

Date <i>7/5/19</i>	Business name <i>Johnny Cavazos</i>	Office held <i>ECU</i>
-----------------------	--	---------------------------

Amount (\$) <i>\$3,480.00</i>	Business address; City; State; Zip Code <i>Los Fresnos</i>
----------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising sign Los Fresnos</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
-------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)	<b>7</b> Payee address;      City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**LOANS (JUDICIAL)**

**SCHEDULE E(J)**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

2 FILER NAME

Estela Chavez Vasquez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

9/13/18

7 Name of lender

out-of-state PAC (ID#:

Antonio & Estela Vasquez

9 Loan Amount (\$)

\$136,500

6 Is lender a financial institution?

Y (N)

8 Lender address; City; State; Zip Code

810 W Ocean Blvd Ste C2  
Los Fresnos, TX 78546

10 Interest rate

11 Maturity date

12 Lender's Principal Occupation

Optometrist/sudsl

13 Lender's Job Title

Optometrist/sudsl

14 Lender's Employer/Law Firm

Los Fresnos Eye Clinic / Cameron County

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address; City; State; Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**LOANS (JUDICIAL)**

**SCHEDULE E(J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): <u>1</u>
2 FILER NAME <u>Estela Chavez Vasquez</u>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <u>5/20/09</u>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Rio Bank</u>	9 Loan Amount (\$) <u>\$10,000<sup>00</sup></u>
6 is lender a financial institution? <input checked="" type="radio"/> Y <input type="radio"/> N	8 Lender address; City; State; Zip Code <u>3401 Old Hwy 77 Brownsville, TX 78520</u>	10 Interest rate <u>6.82%</u>
		11 Maturity date <u>5/30/2022</u>
12 Lender's Principal Occupation <u>Banking Institution</u>		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor <u>Estela Chavez Vasquez</u>	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code <u>810 W. Ocean Blvd - Ste C2 Los Fresnos, TX 78566</u>	
23 Guarantor's Principal Occupation <u>Judge</u>		24 Guarantor's Job Title <u>Judge Cameron County Court #5</u>
25 Guarantor's Employer/Law Firm <u>Cameron County</u>		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name
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6 Amount (\$)	7 Payee address; City; State; Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**