LEOFREDO PENA

		1 Filer ID		2 Total pages filed:	
The CIOH Instruction	Guide explains how to comple	ete this form.		4	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Leofredo	MI	OFFICE USE ONLY Date Received	
	NICKNAME	LAST Pena	SUFFIX	CAMERON COUNTY DE TREMENT OF ELECTRON VOTER REGISTRATIO	
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / 5505 W. Business 83	/SUITE#; CITY;	ZIP CODE	Date Hand-delivered on Date Postmarked 20	
Change of Address	Harlingen, TX 78552			Date Processed Date Imaged	
CAMPAIGN	MS/MRS/MR	FIRST	MI	7.00000100111111	
TREASURER NAME	MR. D	AVID T.			
	NICKNAME GONZAI	LAST LES	SUFFIX		
TOTACHOLD	STREET ADDRESS (NO PO I				
TREASURER ADDRESS (Residence or Business)	34351 ISLAND ES	TATES STREET, SA	AN BENITO, TEX	AS, 78586	
ADDRESS	34351 ISLAND ES	E NUMBER EXTENSION	AN BENITO, TEX	AS, 78586	
ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE	34351 ISLAND ES AREA CODE PHONE 956 778-003	E NUMBER EXTENSION 32 30th day before election		15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)	
ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE	34351 ISLAND ES AREA CODE PHONE 956 778-003	E NUMBER EXTENSION 32 30th day before election] Runoff [15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) Year	
ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE	34351 ISLAND ES	E NUMBER EXTENSION 30th day before election 8th day before election	Runoff [Exceeded \$500 limit [Month Day	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) Year	
ADDRESS (Residence or Business) CAMPAIGN TREASURER PHONE REPORT TYPE PERIOD COVERED	AREA CODE PHONE 956 778-003 January 15 X Month Day Year 01/24/2020 ELECTION DATE Month Day Year	E NUMBER EXTENSION 32 30th day before election 8th day before election THROUGH	Runoff [Exceeded \$500 limit [Month Day 02/22/202 ELECTION TYPE Runoff Special	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) Year Other	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

				2 of 4
13 C / OH NAME	Pena, Leofredo	14	Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expenditures These expenditures may have been made without the of d officeholders are required to report this information only	candidate's or officeholder'	s knowledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
	1 Jacobson	COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		I AL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI ARANTEES OF LOANS), UNLESS ITEMIZED	N PLEDGES,	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS ITER	MIZED \$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST PRIOD	DAY OF THE \$	2,838.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF TITING PERIOD	THE LAST DAY \$	0,00
17 AFFADAVIT		l swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	erjury, that the accompan ormation required to be rep	ying report is orted by me
My	JOSY MERCADO otary ID #125007829 c Commission Expires February 13, 2021	•	didate or Officeholder	
Sworn to and subso	TARY STAMP / SEAL AB cribed before me, by the s	\mathcal{L}_{i}	this the 24th	day
Signatura of office	cer administering	Printed name of officer administering	Title of officer admini	stering oath

SUBTOTALS - C/OH

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

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18 FILER NAME 19 Filer ID			19 Filer ID		
F	Pena, Le	ofredo			
20 SCHEDULE SUBTOTALS				SUBTO	TAL AMOUNT
1	NAME OF	SCHEDULE			
1	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2	. X	X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00	
4	4. SCHEDULE E: LOANS		\$		
5	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	0.00	
6	X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
7	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$		
8	. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9	. X	X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
1.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$		
1	1.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
1.	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	ETURNED	\$	

PLEDGED CONTRIBUTIONS	SCHEDULE B		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/4		
2 FILER NAME	3 Filer ID		
Pena, Leofredo	dtg2022@icloud.com		
TOTAL OF UNITEMIZED PLEDGES	\$ 0.00		
5 Date 6 Full name of pledgorout-of-state PAC (ID#:)	8 Amount of pledge (\$) 9 In-kind description (If applicable)		
7 Pledgor Address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instruc			
Zinployor (doc matter)	······ >		