# BENJAMIN EURESTI, JR.

Runoff Report July 15, 2020

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### JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH #100786603 **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00019971 11 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** The Honorable Benjamin NAME Date Received **ELECTRONICALLY FILED** 07/02/2020 **NICKNAME** LAST SUFFIX Euresti Jr. CAMERON COUNTY Date Hand delivered by Mais Hostings Col IONS CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE VOTERREGISTRATION **OFFICEHOLDER** 974 E. Harrison MAILING Receipt # **ADDRESS** '2020 Change of Address Brownsville, TX 78520 Date Processed 87. Date Imaged **CAMPAIGN** MS/MRS/MR **FIRST** MI **TREASURER** Mrs. Pam L. NAME NICKNAME LAST SUFFIX Marcinik **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: ZIP CODE CITY; STATE: TREASURER 256 Starvation Hill Ln. **ADDRESS** (Residence or Business) Pipe Creek, TX 78063 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION** TREASURER (956) 246-3103 PHONE REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) X July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) PERIOD Day Year Month Month Day Year COVERED 01/01/2020 THROUGH 06/30/2020 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff 11/06/2018 X General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) District Judge District 107 Cameron District Judge District 107 **GO TO PAGE 2** Forms provided by Texas Ethics Commission www.ethics.state.tx.us

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	13 C / OH NAME Euresti Jr., Benjamin (The Honorable) 14 Filer ID 00019971							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures i	accepted or political expenditure may have been made without to juired to report this information	he candidate's or off	iceholder's kno	wlędąe or		
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			The Honora	ble Benjamin Eure	esti Jr.	7 90		
		_	Signature of	Candidate or Officel	no der			
AFFIX NOT	TARY STAMP / SEAL ABO	OVE						
Sworn to and subsc	ribed before me, by the sa	aid	handrida (1914)	, this the		day		
of	, 20 to ce	ertify which, witness n	ny hand and seal of office.					
Signature of office	er administering oath	Printed name o	f officer administering oath	Title of office	cer administerir	ng cath		

## **SUBTOTALS - JC/OH** FORM JC/OH **COVER SHEET PG 3** 18 FILER NAME 19 Filer ID (Ethics Commission Filers) Euresti Jr., Benjamin (The Honorable) 00019971 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE E(J): LOANS (JUDICIAL) \$ X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 3,360.25 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

### SCHEDULE F1

Advertising Expense

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

Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee		Fees Food/Beverage Expense Git/Awards/Memorials Expense amittee Legal Services	Food/Beverage Expense Folling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The instruction Guide explains	how to con	plete this form.	_				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)		
	Sch: 1/7 Rpt: 4/11		Euresti Jr., Benjamin (The Honorable)				00019971			
4	Date	5	Payee name					•		
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			Brownsville, TX 78523							
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### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/7 Rpt: 5/11 Euresti Jr., Benjamin (The Honorable) 00019971 4 Date Payee name 03/16/2020 Herman's Optical Amount (\$) Payee address: City; State; Zip Code \$487.95 2120 East Price Road Suite B Brownsville, TX 78521 **PURPOSE** (a) Category (See Categorias listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Eye Glasses **EXPENDITURE** Check if Austin, TX, officeholder riving expense Eye Glasses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/10/2020 La Jaiba Mexican Seafood Amount (\$) Payee address; City: State; Zip Code \$157.03 3230 Pablo Kisel Boulevard Suite 106 Brownsville, TX 78520 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner with constituents Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/03/2020 Longhorn Cattle Co. Amount (\$) Payee address: City; State; Zip Code \$153.79 3055 W. Expressway 83 San Benito, TX 78586 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Food/Beverage Expense Check if travel outside of Texas Complete Schedule T. **EXPENDITURE** Check if Austin, TX, afficeholder living expense Dinner with constituents Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

Adventsing Expense

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

Loan Repayment/Reimbursement

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### SCHEDULE F1

Adventsing Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement

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### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		G mmittee L	itt/Awards/Memorials E	xpense		ense lges/(	Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above	)
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### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Git/Awards/Memoria/s Expense Legal Services	Food/Beverage Expense Gitt/Awards/Memoria's Expense Legal Services  The Instruction Guide explains how to complete this form.			Travel in District Travel Out of District OTHER (enter a category not listed above)				
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### SCHEDULE F1

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

Event Expense Loa Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prin

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officefiolder/Politica Credit Card Payment	Co	mmittee	Legal Services The Instruction Gu	-		ages/Contra nplete this			OTHER (enter a	category not listed ab	ove)
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	Sch: 7/7 Rpt: 10/11			Benjamin (The F	ionorable)					00019971		
4	Date	5	Payee name	<b>:</b>								
	06/15/2020		The Grill at	Jim's Pier								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de					
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			South Pad	re Island, TX 780	63							
8	PURPOSE	(a)		see Categories listed at th	e top of this sch	edule)	(b) Desc					
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ASSETS VALUED AT \$500 OR MORE	SCHEDULE
The Instruction Guide explains how to complete this fo	orm. 1 Total pages Schedule M: Sch: 1/1 Rpt: 11/11
FILER NAME Euresti Jr., Benjamin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00019971
Description of Asset Home Security Alarm	
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