DAVID A. BETANCOURT

SEMI-ANNUAL REPORT JULY 15, 2021

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CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** CAMEDONICOLIN NAME Date RECEIVED TIMENT OF ELECTIONS & NICKNAME SUFFIX **VOTER REGISTRATION** 4 CANDIDATE / ADDRESS / PO BOX; JUL 1 5 2021 **OFFICEHOLDER** MAILING **ADDRESS** BROWNSVILLE, TX 78521 EA CODE PHONE NUMBER EXTENSION Change of Address 5 CANDIDATE/ Date Hand-delivered or Date **OFFICEHOLDER PHONE** Receipt # Amount \$ 6 CAMPAIGN TREASURER Date Processed NAME Date Imaged BETAN COURT STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 2 5 P/CAP/LUY C/R CAMPAIGN STATE: ZIP CODE TREASURER **ADDRESS** BROWNSJICCE, TX 78521 (Residence or Business) AREA CODE 8 CAMPAIGN **TREASURER** PHONE (956) 9 REPORT TYPE January 15 30th day before election 15th day after campaign Runoff treasurer appointment (Officeholder Only) July 15 Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED 30/21 THROUGH 11 ELECTION **ELECTION TYPE** Primary Other Description Runoff Month Year Day Special General 12 OFFICE 13 OFFICE SOUGHT (if known) 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. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

| 15 C/OH NAME DAU | 1D | A. BETANCOURT | 16 Filer ID (Ethics Commission Filers) | | | |
|--|--|--|--|--|--|--|
| 17 CONTRIBUTION TOTALS | RIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN | | \$ 0 | | | |
| | 2. | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | | | |
| EXPENDITURE TOTALS | 3. | TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 0 | | | |
| | 4. | TOTAL POLITICAL EXPENDITURES | \$ Ø | | | |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD | T DAY \$ | | | |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD | * 7,900 | | | |
| 18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information | | | | | | |
| i le | equirea to be | reported by me under Title 15, Election Code. | | | | |
| | | D. 1-9/ | 5 | | | |
| | | - Van Ui | | | | |
| | | Signature of Cal | ndidate or Officeholder | | | |
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| | | Please complete either option below | <i>r</i> : | | | |
| | | i loude descriptore destate operation action | · • | | | |
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| (1) Affidavit | | | | | | |
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| NOTARY STAMP/SEA | \L | | | | | |
| Sworn to and subscribed | i before me | by this the | day of, | | | |
| | | | | | | |
| 20, to certify which, witness my hand and seal of office. | | | | | | |
| Signature of officer administe | | B. C. L. Company of the Company of t | Title of officer administering oath | | | |
| Signature of officer administr | eillig oatii | Printed name of officer administering oath | Title of Officer administering cath | | | |
| | | OR | | | | |
| (2) Unsworn Declarati | lon | | | | | |
| My name is DAVID A. BETANCOVRT, and my date of birth is 1-7-53. | | | | | | |
| My name is PAVID A. BETANCOURT and my date of birth is My address is | | | | | | |
| (street) (city) (state) (zip code) (country) | | | | | | |
| Executed in CAMERON County, State of TEXAS, on the 19 day of JUIY, 20 20. | | | | | | |
| Executed in Variable of County, State of Vear), on the Variable (wear), | | | | | | |
| | Hard a Filan | | | | | |
| Signature of Candidate/Officeholder (Declarant) | | | | | | |