

**EDDIE**  
**TREVINO, JR.**

**SEMI-ANNUAL  
REPORT  
JULY 15, 2021**

# 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)

2 Total pages filed: **13**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Mr. Ediberto J.  
NICKNAME LAST SUFFIX  
Eddie Trevino, Jr.

**OFFICE USE ONLY**

Date Received  
CAMERON COUNTY  
DEPARTMENT OF ELECTIONS &  
VOTER REGISTRATION

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
2200 Boca Chica, Ste. 102, Brownsville, Texas 78521

4:00pm JUL 15 2021

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(956 ) 554-0683

Date Hand-delivered or Date Postmarked

By: *Quaden*

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Mrs. Evangelina  
NICKNAME LAST SUFFIX  
Trevino

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
165 Calle Jacaranda, Brownsville, Texas 78520

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(956 ) 459-8177

9 REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  
 July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year  
01 / 01 / 2021 THROUGH 06 / 30 / 2021

11 ELECTION

ELECTION DATE  
Month Day Year  
/ /  
ELECTION TYPE  
 Primary  Runoff  Other Description  
 General  Special

12 OFFICE

OFFICE HELD (if any)  
Cameron County Judge

13 OFFICE SOUGHT (if known)

14 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.

Additional Pages

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

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

47,500.00

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$

6,175.00

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

113,247.16

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

70,000.00

18 SIGNATURE

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.

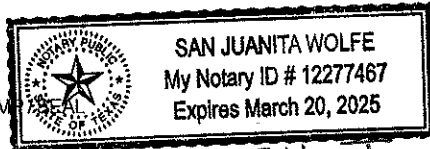
*Eddie Trevino, Jr.*

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP



Sworn to and subscribed before me by Eddie Trevino, Jr. this the 15th day of July

20 24, to certify which, witness my hand and seal of office.

*San Juanita Wolfe*

Signature of officer administering oath

San Juanita Wolfe

Printed name of officer administering oath

*Notary*

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street)

(city)

(state)

(zip code)

(country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

|  |   |  |
|--|---|--|
| 19 FILER NAME<br><b>Eddie Trevino, Jr.</b> |   | 20 Filer ID (Ethics Commission Filers) |
| 21 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE  |   | SUBTOTAL<br>AMOUNT                     |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 47,500.00                           |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 1,377.29                            |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$                                     |
| 4.   | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 70,000.00                           |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS   | \$ 5,400.00                            |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                                     |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$ 70,000.00                           |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$ 775.00                              |
| 9.   | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$                                     |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$                                     |
| 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

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

|  |   |  |
|--|---|--|
| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:<br><b>5</b>               |
| 2 FILER NAME<br><b>Eddie Trevino, Jr.</b>  |   | 3 Filer ID (Ethics Commission Filers)                |
| 4 Date<br><b>3/19/2021</b>   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Linebarger Goggan Blair &amp; Sampson, LLP</b><br>6 Contributor address; City; State; Zip Code<br><b>P. O. Box 17428 Austin, Tx 78760</b> | 7 Amount of contribution (\$)<br><b>\$ 5,000.00</b>  |
| 8 Principal occupation / Job title (See Instructions)<br><b>Attorneys</b>  |   | 9 Employer (See Instructions)                        |
| Date<br><b>3/22/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>S &amp; B PAC</b><br>Contributor address; City; State; Zip Code<br><b>P.O. Box 266245 Houston, Tx. 77207</b>                                | Amount of contribution (\$)<br><b>\$ 5,000.00</b>    |
| Principal occupation / Job title (See Instructions)<br><b>Engineers</b>  |   | Employer (See Instructions)                          |
| Date<br><b>3/22/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rudolph Vasquez Gomez</b><br>Contributor address; City; State; Zip Code<br><b>22 Alvarado Ave. Rancho Viejo, Tx 78575</b>                   | Amount of contribution (\$)<br><b>\$ 2,500.00</b>    |
| Principal occupation / Job title (See Instructions)<br><b>Architect</b>  |   | Employer (See Instructions)<br><b>GMS Architects</b> |
| Date<br><b>3/22/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Scot Campbell</b><br>Contributor address; City; State; Zip Code<br><b>28821 S. Altas Palmas, Rd. Harlingen, Tx. 78552</b>                   | Amount of contribution (\$)<br><b>\$ 1,000.00</b>    |
| Principal occupation / Job title (See Instructions)<br><b>Developer</b>  |   | Employer (See Instructions)<br><b>Self-Employed</b>  |
| <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

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

|   |                                 |
|---|---------------------------------|
| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1:<br>5 |
|---|---------------------------------|

|                                    |                                       |
|------------------------------------|---------------------------------------|
| 2 FILER NAME<br>Eddie Trevino, Jr. | 3 Filer ID (Ethics Commission Filers) |
|------------------------------------|---------------------------------------|

|   |  |  |
|---|--|--|
| 4 Date<br>3/23/2021   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bharat R. Patel | 7 Amount of contribution (\$)<br>\$ 5,000.00 |
| 6 Contributor address; City; State; Zip Code<br>800 Convention Center Blvd., McAllen, Tx. 78501 |  |  |

|   |  |
|---|--|
| 8 Principal occupation / Job title (See Instructions)<br>Business owner | 9 Employer (See Instructions)<br>Self-Employed |
|---|--|

|  |   |  |
|--|---|--|
| Date<br>3/23/2021  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>LDG Enterprises, LLC | Amount of contribution (\$)<br>\$ 5,000.00 |
| Contributor address; City; State; Zip Code<br>2805 Fountain Plaza Blvd, Ste A, Edinburg Tx 78539 |   |  |

|  |                             |
|--|-----------------------------|
| Principal occupation / Job title (See Instructions)<br>Engineers | Employer (See Instructions) |
|--|-----------------------------|

|   |   |  |
|---|---|--|
| Date<br>3/24/2021   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Brighton Group LLC | Amount of contribution (\$)<br>\$ 1,000.00 |
| Contributor address; City; State; Zip Code<br>2805 Fountain Plaza Blvd., Ste. A., Edinburg, Tx. 78539 |   |  |

|  |                             |
|--|-----------------------------|
| Principal occupation / Job title (See Instructions)<br>Engineers | Employer (See Instructions) |
|--|-----------------------------|

|  |  |  |
|--|--|--|
| Date<br>3/23/2021  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kane Lindsey, LLC | Amount of contribution (\$)<br>\$ 1,000.00 |
| Contributor address; City; State; Zip Code<br>2614 Dove Avenue, Mission TX 78574 |  |  |

|  |                             |
|--|-----------------------------|
| Principal occupation / Job title (See Instructions)<br>Surveyors | Employer (See Instructions) |
|--|-----------------------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1:  
5

2 FILER NAME 3 Filer ID (Ethics Commission Filers)  
**Eddie Trevino, Jr.**

|   |   |   |
|---|---|---|
| 4 Date<br>3/23/2021   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rene A. Ramirez</b> | 7 Amount of contribution (\$)<br><b>\$ 2,500.00</b> |
| 6 Contributor address; City; State; Zip Code<br><b>1508 S. Lone Star Way Unit 1, Edinburg, TX 78539</b> |   |   |

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)  
**Consultant** **Pathfinder Public Affairs**

|  |   |   |
|--|---|---|
| Date<br>3/23/2021  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Reza Badiozzamani</b> | Amount of contribution (\$)<br><b>\$ 5,000.00</b> |
| Contributor address; City; State; Zip Code<br><b>10100 N. Bentsen Rd., McAllen TX. 78504</b> |   |   |

Principal occupation / Job title (See Instructions) Employer (See Instructions)  
**Engineer** **B2Z Engineering**

|   |  |   |
|---|--|---|
| Date<br>3/24/2021   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rolando R. Rubiano</b> | Amount of contribution (\$)<br><b>\$ 2,500.00</b> |
| Contributor address; City; State; Zip Code<br><b>518 E. Woodland Dr. Harlingen, TX. 78550</b> |  |   |

Principal occupation / Job title (See Instructions) Employer (See Instructions)  
**Engineer** **Green Rubiano & Associates**

|   |  |   |
|---|--|---|
| Date<br>3/24/2021   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>A&amp;I Custom Manufacturing, LLC.</b> | Amount of contribution (\$)<br><b>\$ 1,000.00</b> |
| Contributor address; City; State; Zip Code<br><b>1795 Tulane Ave. Brownsville, TX 78520</b> |  |   |

Principal occupation / Job title (See Instructions) Employer (See Instructions)  
**Building Contractor**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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|   |  |
|---|--|
| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1:<br><b>5</b> |
|---|--|

|   |                                       |
|---|---------------------------------------|
| 2 FILER NAME<br><b>Eddie Trevino, Jr.</b> | 3 Filer ID (Ethics Commission Filers) |
|---|---------------------------------------|

|  |  |   |
|--|--|---|
| 4 Date<br><b>3/24/2021</b>   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Alejandro G. Meade III</b> | 7 Amount of contribution (\$)<br><b>\$ 500.00</b> |
| 6 Contributor address; City; State; Zip Code<br><b>2700 Santa Iliana Mission, Tx 78572</b> |  |   |

|  |   |
|--|---|
| 8 Principal occupation / Job title (See Instructions)<br><b>Banker</b> | 9 Employer (See Instructions)<br><b>Texas Regional Bank</b> |
|--|---|

|  |   |   |
|--|---|---|
| Date<br><b>3/24/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>S.F. Vale</b> | Amount of contribution (\$)<br><b>\$ 1,000.00</b> |
| Contributor address; City; State; Zip Code<br><b>P.O. Box 156 Rio Grande, City TX. 78582</b> |   |   |

|  |   |
|--|---|
| Principal occupation / Job title (See Instructions)<br><b>Starr Camargo Bridge</b> | Employer (See Instructions)<br><b>Self-Employed</b> |
|--|---|

|  |   |   |
|--|---|---|
| Date<br><b>3/24/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Political Action Committee of Winstead, P.C</b> | Amount of contribution (\$)<br><b>\$ 1,000.00</b> |
| Contributor address; City; State; Zip Code<br><b>2728 North Harwood St. Ste 500 Dallas, TX 75201</b> |   |   |

|   |                             |
|---|-----------------------------|
| Principal occupation / Job title (See Instructions)<br><b>Attorneys</b> | Employer (See Instructions) |
|---|-----------------------------|

|   |  |  |
|---|--|--|
| Date<br><b>3/24/2021</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rigoberto Villarreal</b> | Amount of contribution (\$)<br><b>\$2,000.00</b> |
| Contributor address; City; State; Zip Code<br><b>1405 Pamela Dr. Mission TX 78572</b> |  |  |

|  |   |
|--|---|
| Principal occupation / Job title (See Instructions)<br><b>Consultant</b> | Employer (See Instructions)<br><b>Self-Employed</b> |
|--|---|

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

If the requested information is not applicable, DO NOT include this page in the report.

|  |   |   |
|--|---|---|
| The Instruction Guide explains how to complete this form.  |   | 1 Total pages Schedule A1:<br><b>5</b>                  |
| 2 FILER NAME<br><b>Eddie Trevino, Jr.</b>  |   | 3 Filer ID (Ethics Commission Filers)                   |
| 4 Date<br><b>3/25/2021</b>   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>John W. Hudson, Jr.</b> | 7 Amount of contribution (\$)<br><b>\$ 500.00</b>       |
| 6 Contributor address; City; State; Zip Code<br><b>3014 Fairway Drive Sugar Land, TX. 77478</b>  |   |   |
| 8 Principal occupation / Job title (See Instructions)<br><b>Engineer</b>   |   | 9 Employer (See Instructions)<br><b>Self-Employed</b>   |
| Date<br><b>3/23/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>SJPA, LLC</b>             | Amount of contribution (\$)<br><b>\$ 1,000.00</b>       |
| Contributor address; City; State; Zip Code<br><b>510 E. Ramsey Rd., Ste 1A, San Antonio, TX 78216</b>  |   |   |
| Principal occupation / Job title (See Instructions)<br><b>Architects</b>   |   | Employer (See Instructions)                             |
| Date<br><b>3/25/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Jacinto Garza</b>         | Amount of contribution (\$)<br><b>\$ 2,500.00</b>       |
| Contributor address; City; State; Zip Code<br><b>27304 South Bass Blvd. Harlingen, TX 78552</b>  |   |   |
| Principal occupation / Job title (See Instructions)<br><b>Engineer</b>   |   | Employer (See Instructions)<br><b>L&amp;G Engineers</b> |
| Date<br><b>3/25/2021</b>   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br><b>Rusty Brechot</b>         | Amount of contribution (\$)<br><b>\$ 2,500.00</b>       |
| Contributor address; City; State; Zip Code<br><b>709 Escanden Ave. Rancho Viejo TX 78575</b>   |   |   |
| Principal occupation / Job title (See Instructions)<br><b>Banker</b>   |   | Employer (See Instructions)<br><b>Lone Star Bank</b>    |
| <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> |   |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

|  |  |   |  |
|--|--|---|--|
| The Instruction Guide explains how to complete this form.  |  | 1 Total pages Schedule A2:<br><b>1</b>  |  |
| 2 FILER NAME<br>Eddie Trevino, Jr.   |  | 3 Filer ID (Ethics Commission Filers)   |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS  |  | \$  |  |
| 5 Date<br>3/24/21  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Daniel Rios                                       | 8 Amount of Contribution \$<br>\$1,377.29                                       | 9 In-kind contribution description<br>Campaign Event |
| 7 Contributor address; City; State; Zip Code<br>104 E. Lark Ave McAllen TX 78504   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)<br>Engineer  |  | 11 Employer (FOR NON-JUDICIAL) (See Instructions)<br>S&B Infrastructure LTD     |  |
| 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 <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>.....<br>Contributor address; City; State; Zip Code | Amount of Contribution \$   | In-kind contribution description                     |
|  |  | <input type="checkbox"/> 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)  |  | 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)   |  |   |  |
| <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> |  |   |  |

# LOANS

# SCHEDULE E

If the requested information is not applicable, **DO NOT** include this page in the report.

|   |  |   |
|---|--|---|
| The Instruction Guide explains how to complete this form.                           |  | 1 Total pages Schedule E:<br><b>1</b>   |
| 2 FILER NAME<br>Eddie Trevino, Jr.  |  | 3 Filer ID (Ethics Commission Filers)   |
| 4 TOTAL OF UNITEMIZED LOANS   |  | \$  |
| 5 Date of loan<br>5/10/2016   | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Eddie Trevino, Jr.   | 9 Loan Amount (\$)<br>\$ 70,000.00  |
| 6 Is lender a financial institution?<br><br>Y <input checked="" type="checkbox"/> N | 8 Lender address; City; State; Zip Code<br>2200 Boca Chica Blvd., Ste. 102 Brownsville, TX 78521 | 10 Interest rate  |
|   |  | 11 Maturity date  |
| 12 Principal occupation / Job title (See Instructions)<br>Attorney                  |  | 13 Employer (See Instructions)<br>Trevino & Bodden  |
| 14 Description of Collateral<br><input checked="" type="checkbox"/> none            |  | 15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions) |
| 16 GUARANTOR INFORMATION<br><br><input type="checkbox"/> not applicable             | 17 Name of guarantor   | 19 Amount Guaranteed (\$)   |
|   | 18 Guarantor address; City; State; Zip Code  |   |
| 20 Principal Occupation (See Instructions)  |  | 21 Employer (See Instructions)  |
| Date of loan  | Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )                           | Loan Amount (\$)  |
| Is lender a financial institution?<br><br>Y N                                       | Lender address; City; State; Zip Code  | Interest rate   |
|   |  | Maturity date   |
| Principal occupation / Job title (See Instructions)                                 |  | Employer (See Instructions)   |
| Description of Collateral<br><input type="checkbox"/> none                          |  | <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)               |
| GUARANTOR INFORMATION<br><br><input type="checkbox"/> not applicable                | Name of guarantor  | Amount Guaranteed (\$)  |
|   | Guarantor address; City; State; Zip Code   |   |
| Principal Occupation (See Instructions)   |  | Employer (See Instructions)   |

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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<br>Eddie Trevino, Jr. | 3 Filer ID (Ethics Commission Filers) |
|----------------------------|------------------------------------|---------------------------------------|

|                    |                             |
|--------------------|-----------------------------|
| 4 Date<br>4/5/2021 | 5 Payee name<br>Dann Rivera |
|--------------------|-----------------------------|

|                              |   |                      |              |                   |
|------------------------------|---|----------------------|--------------|-------------------|
| 6 Amount (\$)<br>\$ 1,000.00 | 7 Payee address;<br>5196 Sugar Mill Rd. | City;<br>Brownsville | State;<br>TX | Zip Code<br>78520 |
|------------------------------|---|----------------------|--------------|-------------------|

|                          |   |                 |
|--------------------------|---|-----------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Consulting  | (b) Description |
|                          | (c) <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<br>Eddie Trevino, Jr. | Office sought | Office held<br>Cameron County Judge |
|---|---|---------------|-------------------------------------|

|                   |                   |
|-------------------|-------------------|
| Date<br>4/26/2021 | Payee name<br>BMG |
|-------------------|-------------------|

|                            |                                 |                       |              |                        |
|----------------------------|---------------------------------|-----------------------|--------------|------------------------|
| Amount (\$)<br>\$ 3,500.00 | Payee address;<br>P.O. Box 5686 | City;<br>Brownsville, | State;<br>TX | Zip Code<br>78521-5686 |
|----------------------------|---------------------------------|-----------------------|--------------|------------------------|

|                        |   |             |
|------------------------|---|-------------|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule)<br>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 ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name<br>Eddie Trevino, Jr. | Office sought | Office held<br>Cameron County Judge |
|---|---|---------------|-------------------------------------|

|                  |                           |
|------------------|---------------------------|
| Date<br>5/6/2021 | Payee name<br>Dann Rivera |
|------------------|---------------------------|

|                          |                                       |                       |               |                   |
|--------------------------|---------------------------------------|-----------------------|---------------|-------------------|
| Amount (\$)<br>\$ 600.00 | Payee address;<br>5196 Sugar Mill Rd. | City;<br>Brownsville, | State;<br>TX. | Zip Code<br>78526 |
|--------------------------|---------------------------------------|-----------------------|---------------|-------------------|

|                        |   |             |
|------------------------|---|-------------|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule)<br>Consulting  | 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<br>Eddie Trevino, Jr. | Office sought | Office held<br>Cameron County Judge |
|---|---|---------------|-------------------------------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

If the requested information is not applicable, DO NOT include this page in the report.

### 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:<br>2 | <b>2</b> FILER NAME<br>Eddie Trevino, Jr. | <b>3</b> Filer ID (Ethics Commission Filers) |
|--|---|--|

|                            |   |
|----------------------------|---|
| <b>4</b> Date<br>5/25/2021 | <b>5</b> Payee name<br>St. Joseph Academy |
|----------------------------|---|

|                                   |  |
|-----------------------------------|--|
| <b>6</b> Amount (\$)<br>\$ 300.00 | <b>7</b> Payee address;<br>City; State; Zip Code |
|-----------------------------------|--|

|                                    |   |                            |
|------------------------------------|---|----------------------------|
| <b>8</b><br>PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Style Show Ad   | (b) Description<br>Sponsor |
|                                    | (c) <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<br>Eddie Trevino, Jr. | Office sought<br>Cameron County Judge | Office held |
|---|---|---------------------------------------|-------------|

|      |            |
|------|------------|
| Date | Payee name |
|------|------------|

|             |   |
|-------------|---|
| Amount (\$) | Payee address;<br>City; State; Zip Code |
|-------------|---|

|                               |   |             |
|-------------------------------|---|-------------|
| <b>PURPOSE OF EXPENDITURE</b> | 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 <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

|      |            |
|------|------------|
| Date | Payee name |
|------|------------|

|             |   |
|-------------|---|
| Amount (\$) | Payee address;<br>City; State; Zip Code |
|-------------|---|

|                               |   |             |
|-------------------------------|---|-------------|
| <b>PURPOSE OF EXPENDITURE</b> | 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 <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

If the requested information is not applicable, **DO NOT** include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 10(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)  |

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F4:<br>1                               | <b>2</b> FILER NAME<br>Eddie Trevino, Jr.   | <b>3</b> Filer ID (Ethics Commission Filers) |
| <b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD   |   | \$ 775.00                                    |
| <b>5</b> Date<br>5/3/2021  | <b>6</b> Payee name<br>Texas Democratic Party   |  |
| <b>7</b> Amount (\$)<br>\$775.00                                     | <b>8</b> Payee address; City; State; Zip Code<br>1106 Lavaca, Suite 100 Austin TX 78701   |  |
| <b>9</b> TYPE OF EXPENDITURE   | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political  |  |
| <b>10</b> PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Other   | (b) Description<br>Voter Access File         |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| <b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name<br>Eddie Trevino, Jr.   | Office sought<br>Cameron County Judge        |
| Date   | Payee name  |  |
| Amount (\$)  | Payee address; City; State; Zip Code  |  |
| TYPE OF EXPENDITURE  | <input type="checkbox"/> Political <input type="checkbox"/> Non-Political   |  |
| 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 <u>ONLY</u> if direct expenditure to benefit C/OH           | Candidate / Officeholder name   | Office sought<br>Office held                 |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>           |   |  |