## EDDIE SOLIS

SEMI-ANNUAL REPORT JANUARY 18, 2022

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:			
3 CANDIDATE / MS/MRS/MR FIRST OFFICEHOLDER W.c.rards			50	M) NS	OFFICE USE ONLY		
NAME	NICKNAME	Delaunay	and the second s	SUFFIX	Date Received <sub>CAM</sub> DEPARTME VOTE	ERON COUNTY ENT OF ELECTIONS & R REGISTRATION	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #	CITY; STATE;	ZIP CODE	•	N 1 4 2022	
Change of Address	27521 S	White Kinch	id La Feria	Tx 78559		RECTIVED	
5 CANDIDATE/ OFFICEHOLDER PHONE	(956) 70	PHONE NUMBER  3-5224	EXTENSIO	N	Date Band-deline	or Date Postmarked  Amount \$	
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI	receipt #	Allogit ¢	
NAME	NOCKNIANE	VIIIVIG			Date Processed		
	NICKNAME	LAST		SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO	PO BOX PLEASE); APT / S	UITE #; CITY;		STATE;	ZIP CODE	
(Residence or Business)	2752151	White Reach re	d La Feria T	x 785	59		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSIO	vi			
9 REPORT TYPE	January 15	30th day before e	lection Runo	f	15th day aft treasurer ap (Officeholde		
	July 15	8th day before ele		ded Modified ling Limit		t (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year	THROUGH	Month /2	Day Year / 3 / /20	21	
11 ELECTION	ELECTION DATE			LECTION TYPE			
	Month Day	Year Primary	Runoff	Other Description			
		General	Special	<del> </del>			
12 OFFICE	OFFICE HELD (If any)	my Constable PC	13 OFFICE SC	UGHT (If known	)		
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFICEH	OF POLITICAL CONTRIBUTIONS OLDER, THESE EXPENDITURES ID OFFICEHOLDERS ARE REQUIRED.	MAY HAVE BEEN MADE WI	THOUT THE CANE	DIDATE'S OR OFFICEHOLI	DER'S KNOWLEDGE OR	
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME  COMMITTEE TYPE  COMMITTEE TYPE						
Additional Pages	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS				
	***************************************	GO TO	PAGE 2				

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME	ierundo S Delminas		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL PLEDGES, LOANS, OR GUARAN CONTRIBUTIONS MADE ELECT	CONTRIBUTIONS (OTHER THAN ITEES OF LOANS, OR RONICALLY)	* 0
	2. TOTAL POLITICAL CONTRIBE (OTHER THAN PLEDGES, LOANS	JTIONS S, OR GUARANTEES OF LOANS)	\$ 4
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL	EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDIT	<b>\$</b>	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	ONS MAINTAINED AS OF THE LAS	\$ 41.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF A LAST DAY OF THE REPORTING	ALL OUTSTANDING LOANS AS OF PERIOD	THE \$
	wear, or affirm, under penalty of perjury, that uired to be reported by me under Title 15, Ele	and the same of th	e and correct and includes all information
		Signature of Ca	ndidate or Officeholder
	Please comple	ete either option below	r:
(1) Affidavit	NORMA RIOS My Notary ID # 131183930 Expires June 22, 2025		
NOTARY STAMP/SEAL			
Sworn to and subscribed	before me by <u>BVBKARDO</u>	SoUS this the	10 H day of January
กท	which, witness my hand and seal of office.	<b>.</b>	
Signature of officer administer	en NORMA	Plos 14	aministrative HSSistant
Signature of officer administrates		r administering oath DR	Title of officer administering oath
(2) Unsworn Declaration			
		· ·	,—————————————————————————————————————
My address is	/atract\		stata) /ain anda) /anustas)
Executed in	(street)County, State of	, ,	state) (zip code) (country) ) 20 (year)
		Signature of Candid	late/Officeholder (Declarant)

## CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

	The Instruction Guide explains how to complete this form.						
	•• Complete only if "Report Type" on page 1 is marked "Final Report" ••						
1	C/OH I						
	STONE	Sulvado 5 Melangy .					
3	SIGNA	ATURE / / / / / / / / / / / / / / / / / / /					
	l do no	t expect any further political contributions or political expenditures in connection with my candidacy. I understand that					
	designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.						
		Signature of Candidate / Officeholder					
4		WHO IS NOT AN OFFICEHOLDER  splete A & B below <i>only</i> if you are not an officeholder. ••					
	A.	CAMPAIGN FUNDS					
	Chec	k only one:					
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.					
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.					
	B.	ASSETS					
	Check	confly one:					
		I do not retain assets purchased with political contributions or interest or other income from political contributions.					
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.					
		Signature of Candidate					
		CHOLDER  Delete this section only if you are an officeholder **					
	1	I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.					
		Signature of Officeholder					

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