EDDIE TREVINO, JR.

SEMI-ANNUAL REPORT JANUARY 18, 2022

CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 1 CAMPAIGN FINANCE REPORT** 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The C/OH instruction Guide explains how to complete this form. MS / MRS / MR М 3 CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Ediberto J. Mr. Date Receiver FRON COUNTY DEPARTMENT OF ELECTIONS & NAME NICKNAME SUFFIX LAST VOTER REGISTRATION Eddie Trevino, Jr. 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE JAN 14 2022 OFFICEHOLDER 2200 Boca Chica, Ste. 102, Brownsville, Texas 78521 MAILING **ADDRESS** 4:11pm Change of Address RECEIVED 5 CANDIDATE/ AREA CODE PHONE NUMBER **EXTENSION OFFICEHOLDER** (956 554-0683 PHONE Receiot # Amount S MS / MRS / MR FIRST мі 6 CAMPAIGN TREASURER Mrs. Evangelina Date Processed NAME NICKNAME LAST Date Imaged Trevino STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CAMPAIGN TREASURER 165 Calle Jacaranda, Brownsville, Texas 78521 **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE) 459-8177 (956 9 REPORT TYPE 15th day after campaign X January 15 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month Day Year Month Dav COVERED 07 01 2021 THROUGH 31 / 2021 ELECTION TYPE ELECTION DATE 11 ELECTION Primary Runoff Other Description Month Day Year Special General OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE Cameron County Judge 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE I OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR **POLITICAL** CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC 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 0	Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL C PLEDGES, LOANS, OR GUARANT CONTRIBUTIONS MADE ELECTRO	EES OF LOANS, OR	\$	
	2. TOTAL POLITICAL CONTRIBUT (OTHER THAN PLEDGES, LOANS,		\$ 32,5	500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EX	KPENDITURE.	\$	
3	4. TOTAL POLITICAL EXPENDITU	RES	\$ 11,02	2.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTION OF REPORTING PERIOD	S MAINTAINED AS OF THE LAS	T DAY \$ 134,7	24.68
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF AL LAST DAY OF THE REPORTING PE		THE \$ 70,00	0.00
(1) Affidavit	SAN JUANITA WOLFE	Signature of Car	didate or Officehol	der
NOTARY STAM	My Notary ID # 12277467 Expires March 20, 2025 Eddie Trevino, Jr.	4hi- 1h- 1	4th	January
	which, witness my hand and seal of office. San Juanita Wolfe	this the _	Notary Pul	olic
Signature of officer administeri				
-	T THE OWNER OF STREET	_	i itle of office	er administering oath
A LONG BENEFIT AND AND ASSESSMENT	OR			
(2) Unsworn Declaratio	n			THIRDAYALANGE
My name is _		, and my date of birth is		
				,
	(street)	(city) (sta	ate) (zip code)	(country)
Executed in	County, State of, o	n the day of		
		(month)	, 20 (year)	·
		Signature of Candida	te/Officeholder (Dec	larant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics	Commission Filers)				
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1,	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 32,500.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	X SCHEDULE E: LOANS	\$ 70,000.00				
5.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 11,022.48				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$				
9,	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$				
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/C	рн \$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$				

SCHEDULE A1

Т	The Instruction Guide explains how to complete this fo	form. 1 Total pages Schedule A1;
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:
10/14/2021	Anabell Cantu Cardona	
i	6 Contributor address; City;	State; Zip Code
	1521 Misty Ln Weslaco Tx	78596
8 Principal of Business Ow	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions) Self
Date	Full name of contributor	D#:) Amount of contribution (\$)
10/13/2021	LDG Enterprises, LLC	\$ 2,500.00
10, 1		
	2805 Fountain Plaza Blvd., Ste. A Edinburg	,
Principal occ Engineers	cupation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	O#: Amount of contribution (\$)
10/11/2021	Guerra & Sabo, PLLC	\$ 5,000.00
	Contributor address; City; 5	State; Zip Code
	10213 N. 10th Street McAllen Tx	78504
Principal occ Attorneys	cupation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	#) Amount of contribution (\$)
10/11/2021	Ricardo P. Filizola	\$ 1,000.00
	Contributor address; City; s	State; Zip Code
	155 Calle Jacaranda Brownsville, Tx.	
	upation / Job title (See Instructions)	Employer (See Instructions)
Financial Adv	risor G	BEF Financial Group
	/	

SCHEDULE A1

Th	e Instruction Guide explains how to complete this	1 Total pages Schedule A1:	
2 FILER NAM Eddie Trevi		3 Filer ID (Ethics Commission Filers)	
4 Date 10/14/2021	5 Full name of contributor	C (10#:)	7 Amount of contribution (\$) \$1,500.00
	6 Contributor address; City; 1508 S. Lone Star Way Unit # 1 Edinburg,	State; Zip Code TX 78539	
8 Principal occ Consultants	supation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date 10/5/2021	GOERO International, LLC	(ID#:)	Amount of contribution (\$) \$ 2,500.00
	Contributor address; City;	State; Zlp Code TX 78501	
Principal occu Architects	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(10#:)	Amount of contribution (\$)
10/4/2021	Tillmin G. Welch		\$ 1,000.00
	Contributor address; City; P.O. Box 2489 Edinburg	State; Zip Code TX 78540	
Principal occu Developer/Bail	pation / Job title (See Instructions) Bonds	Employer (See Instruct South Texas Sunrise, LL	,
Date 10/4/2021	Full name of contributor	(ID#:) State; Zip Code TX 78501	Amount of contribution (\$) \$ 500.00
	pation / Job title (See Instructions)	Employer (See Instructi	

Forms provided by Texas Ethics Commission

www.ethlcs.state.tx.us

Revised 8/17/2020

SCHEDULE A1

The	e Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 5
2 FILER NAME Eddie Trevino,			3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2021		AC (IO#:)	7 Amount of contribution (\$) \$ 2,500.00
8 Principal occu Vice President	upation / Job title (See Instructions)	9 Employer (See Instruc Ashbritt	ctions)
Date 10/14/2021	Full name of contributor	AC (ID#:) State; Zîp Code Tx 78541	Amount of contribution (\$) \$1,000.00
Principal occup Developer	pation / Job title (See Instructions)	Employer (See Instruc	itions)
Date	Full name of contributor	State; Zip Code Tx 78504	Amount of contribution (\$) \$ 1,000.00
Principal occup Engineer	ation / Job title (See Instructions)	Employer (See Instruc B2Z Engineering	tions)
Date 10/14/2021	Full name of contributor out-of-state PAG Rene Ramirez Contributor address; City; 1508 S. Lone Star Way Unit 1 Edinburg	C (ID#:) State; Zip Code Tx 78539	Amount of contribution (\$) \$ 1,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct Pathfinder Public Affai	•

SCHEDULE A1

	e Instruction Guide explains	1 Total pages Schedule A1: 5		
2 FILER NAME Eddie Trevino				3 Filer ID (Ethics Commission Filers
4 Date	5 Full name of contributor	out-of-state F	PAC (ID#:	7 Amount of contribution (\$)
10/14/2021	Samuel Maldonado	*************	************	\$ 500.00
	6 Contributor address;	City;	State; Zip Code	
	2236 Arlina Dr.	Edinburg	Tx 78542	
8 Principal occ Engineer	cupation / Job title (See Instruction	ons)	9 Employer (See Instru Self	ictions)
Date	Full name of contributor	out-of-state P	AC (ID#	Amount of contribution (\$)
10/14/2021	Julio Cesar Cerda			\$ 1,500.00
	Contributor address;	City;	State; Zip Code	
	2800 N. Stewart Rd.	Mission	Tx 78574	
Principal occu Engineer	pation / Job title (See Instruction	ns)	Employer (See Instru Self	(ctions)
Date	Full name of contributor	out-of-state P/	AC (ID#)	Amount of contribution (\$)
10/14/2021	David M. Penoli			\$ 2,000.00
	Contributor address;	City;	State; Zîp Code	
	P.O. Box 4889	Mission	Tx. 78573	
		ıs)	Employer (See Instru	ctions)
Principal occu Banker	pation / Job title (See Instruction		Lone Star Bank	A Control of the Cont
	Full name of contributor	out-of-state PA		Amount of contribution (\$)
Banker		Out-of-state PA		Amount of contribution (\$) \$ 2,500.00
Banker Date	Full name of contributor	out-of-state PA		- · · ·
Banker Date	Full name of contributor Jerome Falic		AC (ID#:)	- · · · · · · · · · · · · · · · · · · ·
Date 08/18/2021	Full name of contributor Jerome Falic Contributor address;	City; Hollywood	AC (ID#:) State; Zip Code	\$ 2,500.00

SCHEDULE A1

T	he Instruction Gulde explains ho	1 Total pages Schedule A1:		
2 FILER NAM Eddie Trevin		3 Filer ID (Ethics Commission Filers		
4 Date 08/18/2021	O Tun name of continuator			7 Amount of contribution (\$) \$2,500.00
	6 Contributor address; 6100 Hollywood Blvd.	city; Hollywood	State; Zip Code FL 33024	
Business Ow	ccupation / Job title (See Instructions	3)	9 Employer (Sae Instr Self	uctions)
Date 08/18/2021	Full name of contributor Leon Falic		AC (ID#;	Amount of contribution (\$) \$2,500.00
	Contributor address; 6100 Hollywood Blvd.	City; Hollywood	State; Zip Code FL 33024	
Principal occ Business Ow	supation / Job title (See Instructions) vner)	Employer (See Instru Self	uctions)
Date	te Full name of contributor 🗍 out-of-state PAC (ID#:)		Amount of contribution (\$)	
	Contributor address;	City;	State; Zip Code	•
Principal occ	upation / Job title (See Instructions)		Employer (See Instru	(ctions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zlp Code	
Principal occu	_I ⊔pation / Job title (See Instructions)		Employer (See Instru	ctions)
- 10-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		V-1-		
	ATTACHADDIT	TONAL COPIES	OF THIS SCHEDULE AS I	NEEDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule Ft: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Eddie Trevino, Jr. 4 Date 5 Payee name 8/23/2021 Mary Esther Sorola 6 Amount (\$) 7 Payee address; City; State; Zip Code \$200.00 1850 Briarwyck Dr. Brownsville, TX78521 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Sponsorship Golf Tournament OF EXPENDITURE Check if Iravel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Date Pavee name 9/17/2021 Nuestra Cultura Marichi Association Amount (\$) Payee address; City; State: Zip Code \$ 125.00 304 Sunshine Rd. Brownsville, TX 78521 Category (See Categories listed at the top of this schedule) Description PURPOSE Sponsorship Golf Tournament **EXPENDITURE** Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge Date Payee name 9/24/2021 Sylvia Garza Perez Campaign Amount (\$) Payee address: City; Zip Code State: \$ 150.00 P. O. Box 4322 Brownsville TX 78523 Category (See Categories listed at the top of this schedule) Description PURPOSE Sponsorship Golf Tournament OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Eddie Trevino, Jr. Cameron County Judge ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursem

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidata/Officaholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
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	o complete this form.	Other (enter a category not listed abo	ove)
1 Total pages Schedule	F1: 2 FILER NAME Eddie Trevino, Jr.		3 Filer ID (Ethics Commission	Filers)
4 Date 10/8/2021	5 Payee name City of Brownsville	****		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	<u> </u>
\$ 100.00	1001 E. Elizabeth St.	Brownsville	TX 78520	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Veteran's Program Ad	:		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check If Austi	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/o	Candidate / Officeholder name OH Eddie Trevino, Jr.	Office sought	Cameron Country ในปฏ	ge
Date	Payee name	V Table		
10/18/2021	Maria De Leon			
Amount (\$)	Payee address;	City;	State; Zip Code	
\$2,250.00	3032 Resaca Vist Sr.	Brownsville	TX 78526	
*****	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	El Valle Noticias	Advertising		
EXPENDITURE				
_	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense	
Camplete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name Eddie Trevino, Jr.	Office sought	Office held Cameron County Jud	dge
Date	Payee name			
10/20/2021	Carisma Print & Design			
Amount (\$)	Payee address;	City;	State; Zip Code	
52,989.32	2165 US Military	Brownsville	TX 78520	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Campaign Signs	, i		
	Chack if Iravel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Eddie Trevino, Jr.	Office sought	Office held Cameron County Judge	
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDII E AS NEED		***

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expensa Polling Expensa Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense 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	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Eth	ics Commission Filers)
4	Eddie Trevino, Jr.			
4 Date	5 Payee name			
11/24/2021	Charro Days, Inc.			71.0.1
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$ 125.00	455 E. Elizabeth St.	Brownsville	TX	78520
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Christmas Parade Entry Fee			
OF				
EXPENDITURE				
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Aust	in, TX, officeholder liv	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H Eddie Trevino, Jr.	Office sought	Cameron Cou	Office held nty Judge
Date	Payee name			
11/24/2021	Jose Luis Gomez			
11/24/2021	JOSC LIGIS GOMEZ			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$ 1,500.00	2888 Madrid Ave.,	Brownsville	TX	78526
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Contract labor and T-Posts			
OF EXPENDITURE	Contract labor and 1-Posts			
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder liv	ing expense
O1-1- OMV & disast	Candidate / Officeholder name	Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	1	•	Comanon Cov	mer. Tudos
	Eddie Trevino, Jr.		Cameron Cou	nty Juage
Date	Payee name			
12/3/2,021	Carisma Print & Design			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$ 1,583.16	2165 US Military Hwy.	Brownsville	Tx.	78520
	Category (See Calegories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Campaign Signs			
	Check if travel cutside of Texas, Complete Schedule T,	Check if Aust	in, TX, officeholder liv	ing expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Eddie Trevino, Jr.		Cameron Co	unty Judge
3300	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULEASNE	EDED	

SCHEDULE F1

	***************************************						***********	
	E	XPENDITURE CATEG	GORIES I	FOR B	OX 8(a)			
Candidate/Officeholder/Political Committee Legal Services Credit Card Payment		everage Expense ards/Memorials Expense	Office Ove Polling Exp Printing Ex Salaries/M	rhead/Repense pense kpense Vages/Co	eimbursement ental Expense ontract Labor e this form.	Transportati Travel in Di Travel Out (ion Equ istrict Of Distr	alsing Expense ulpment & Related Expens rict gory not listed above)
1 Total pages Schedule F1:	2 FILER NAME Eddie Trevino, Ji	ſ.				3 Filer ID	(Ethi	ics Commission Filers)
4 Date 12/8/2021	5 Payee name Cameron Coun	ty Dem. Party			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
6 Amount (\$)	7 Payee address;				City;	Sta	ate;	Zip Code
\$ 1,250.00	P.O. Box 53390	09		Harl	ingen	Tx.		78553
8	(a) Category (See Ca	ategories listed at the top of this s	schedule)	(b) D	escription			
PURPOSE OF EXPENDITURE	Filing Fee for Re	e-Election 2022	٠					
	(c) Check if tr	avel outside of Texas, Complete Sch	hedule T.		Check if Aus	lin, TX, officehol	der livl	ng expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ficeholder name Jr.		Of	fice sought	Cameron	Cou	Office held inty Judge
Date	Payee name							
12/8/2021	Cameron County	,						
Amount (\$)	Payee address; City;		City;	Sta	ate;	Zíp Code		
\$ 500.00	1100 E. Monro	e St.	I	Brown	sville	TX	Ľ	78520
	Category (See Cate	egories listed at the top of this sol	hedule)	Di	escription			
PURPOSE OF EXPENDITURE	Donation			Chris	stmas Toy D	rive		
	Check if tra	evel outside of Texas. Complete Sch	nedule T.		Check If Austi	n, TX, officeholo	der livir	ng expense
Complete ONLY if direct	Candidate / Offi	ceholder name		Off	fice sought			Office held
expenditure to benefit C/OH	Eddie Trevino,	Jr.				Ca	merc	on County Judge
Date	Payee name			<u></u>				
12/20/21	United Way							
Amount (\$)	Payee address;				City;	Sta	ıte;	Zip Code
\$ 250.00	634 E. Levee			Brov	vnsville	TX	ζ.	78520
PURPOSE OF EXPENDITURE	Category (See Cale Sponsorship	gories listed at the top of this sch	iedule)	De	escription		de de la constanta de la const	
	Check if trav	val outside of Texas. Complete Sche	edule T.		Check if Austin	n, TX, officehold	er living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Offi			Off	fice sought		***************************************	Office held
experience to penelit C/Off	Eddie Trevino, Ji	ſ .				Cameron (Coun	ty Judge
	ATTACH AI	DDITIONAL COPIES O	F THIS S	CHED	ULE AS NEE	DED		

LOANS SCHEDULE E

If the requested	d information is not applicable, DO NO	T include this page in the re	port.
The	Instruction Guide explains how to compl	lete this form.	1 Total pages Schedule E:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Eddie Trevino, Jr.			
4 TOTAL OF UN	\$		
5 Date of loan	7 Name of lender out-of-state	9 Loan Amount (\$)	
5/10/2016	Eddie Trevino, Jr.		\$70,000.00
6 Is lender a financial Institution?	8 Lender address; City; 2200 Boca Chica, St. 102 Brownsvi	State; Zip Code fle Tx. 78521	10 Interest rate 11 Maturity date
YN		T-10	
12 Principal occupation Attorney	on / Job title (See Instructions)	13 Emplayer (See Instructions)	
14 Description of Coll X none	ateral	15 Check if personal fundaccount (See Instruct	ds were deposited into political
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
not applicable	18 Guarantor address; City;	State; Zip Code	
20 Principal Occupat	ion (See Instructions)	21 Emplayer (See Instructions)	
Date of loan	Name of lender	PAC (ID#;)	Loan Amount (\$)
is lender a financial	Lender address; City;	State; Zip Code	Interest rate
Institution? Y N			Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	<u> </u>
Description of Colfa	ateral	Check if personal fund	ds were deposited into political
none		account (See Instruct	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupation	on (See Instructions)	Employer (See Instructions)	
(f le	ATTACH ADDITIONAL COPI	ES OF THIS SCHEDULE AS NEE truction guide for additional re	