NORMAN W. ESQUIVEL JR.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this for		his form.	Filer ID (Ethics Commission Filers)	2 Total pages filed: 3					
3 CANDIDATE / OFFICEHOLDER	Ms / MRS / MR FIRS		MI W.	OFFICE I	USE ONLY DUNTY				
NAME		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	pate Reteived OF E	LECTIONS &				
	NICKNAME LAS Esqu		suffix Jr .	VOTEN HEGIST	RATION				
4 CANDIDATE /	<u> </u>				naná				
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	1	SUITE #; CITY; Laguna Vista		JUL 14	ED (
Change of Address			gr.						
5 CANDIDATE/	AREA CODE PHONE NUM	4BER	EXTENSION	Date Hand-delivered	or Daje Postmarked				
OFFICEHOLDER PHONE	(956) 431-78	96		Receipt #	Amount \$				
6 CAMPAIGN	MS / MRS / MR FIRS		MI	Rought #	Amount #				
TREASURER NAME	Mrs. Norn	Date Processed	Date Processed						
	Esqu	Date Imaged	Date Imaged						
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEA	ASE); APT / SUITE #;	CITY;	STATE;	ZIP CODE				
TREASURER ADDRESS	1222 Palo Blanco	Lagun	a Vista,	Texas 785	78				
(Residence or Business)									
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION								
PHONE	(956) 639-58	(956) 639-5870							
9 REPORT TYPE	January 15 30	Oth day before election	Runoff	15th day afte treasurer ap (Officeholder	pointment				
	July 15 8th	h day before election	Exceeded Modified Reporting Limit	Final Report	(Attach C/OH - FR)				
10 PERIOD	Month Day	Year	Month	Day Year					
COVERED	1 /1 /	22	THROUGH 6	/ 30 / 22					
11 ELECTION ELECTION DATE ELECTION TYPE									
	Month Day Year	Primary	Runoff Other						
		General	Description Special						
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	٦)					
	Cameron County Cons	table Pct. 1							
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. 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.								
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME								
	COMMITTEE ADDRESS								
Additional Pages	GENERAL COMMITTEE ADDRESS								
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE C	CAMPAIGN TREASURE	R ADDRESS						
I		GO TO PAG			***************************************				
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

CAIVITAIGI	I FINANCE REPORT		
15 C/OH NAME Norman W. Esquivel	ir.	16 Filer ID (Ethic	cs Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	T DAY \$	0.00
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00
	wear, or affirm, under penalty of perjury, that the accompanying report is true juired to be reported by me under Title 15, Election Code.	and correct and	I includes all information
	Marin W		
	Signature of Cal	ndidate or Office	holder
	/		
	Please complete either option below	:	
(1) Affidavit	KARLA HAYLOCK My Notary ID # 128345343 Expires August 4, 2026		
NOTARY STAMP/SEAL			- <u></u> 5
Sworn to and subscribed	before me by Norman W. Equire Jr. this the	13 day of	1 July .
20, to certify	which, witness my hand and seal of office.	install	Public
Signature of officer administer	ring oath Printed name of officer administering oath	Title of c	fficer administering oath
	OR		
(2) Unsworn Declaration	on		
My name is	, and my date of birth is		.
My address is		1	·
Executed in	(street) (city) (s County, State of, on the day of	tate) (zip code , 20) (ve	e) (country)
	Signature of Candid		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

FILER NAME Iorman W. Esquivel Jr.		mmission	Filers)	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT			
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00	
SCHEDULE E: LOANS			0.00	
SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			0.00	
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLIT	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			0.00	
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONA	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITIC	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			0.00	