# RONALD K. SAENZ

July 15, 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 Co	ommission Filers)	2 Total pages	filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Ronald		мі К	OFFIC	E USE ONLY
147 dviL	NICKNAME	LAST Saenz		SUFFIX		CAMERON COUNTY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	84 Calle Jac Brownsville,	aranda	CITY; STATE;	ZIP CODE	VC	JUL 0 8 2022
Change of Address					O <sub>.</sub>	- Out
5 CANDIDATE/ OFFICEHOLDER PHONE	(956 )	9HONE NUMBER 592-4208	EXTENSIO	M	Date Hand-deliver	<u>Xuax</u>
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST  Jose		MI	Receipt #	Amount \$
INAIVIL	NICKNAME	LAST	*********************	SUFFIX		
	Fred	Arias			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	street ADDRESS 1015 Calle E Brownsville,	scondida	SUITE #; CITY;		STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	( 956 )	PHONE NUMBER 455-9406	EXTENSIO	N.		
9 REPORT TYPE	January 15	30th day before	election Runo	off	treasurer	after campaign appointment ider Only)
	July 15	8th day before el	CONON	eded Modified rling Limit	Final Rep	oort (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year		Month	Day Ye	ıse
	2	/ 11 / 22	THROUGH	6	/ 30 / 2	2
11 ELECTION	ELECTION DA	TE	£	ELECTION TYPE		V
	Month Day	Year Primary  24 General	Runoff Special	Other Description	•	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SO Sherif	DUGHT (if known	))	
14 NOTICE FROM POLITICAL COMMITTEE(S)  THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BEEN MADE WITHOUT THE CANDIDATE CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY REPORT THE PROPERTY OF THE			DIDATE'S OR OFFICEH	ハニカギタマ イルハルコ そりたた ハロ		
00/////////////////////////////////////	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS			· · · · · · · · · · · · · · · · · · ·	
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME		, , , , , , , , , , , , , , , , , , ,	
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Ronald K. Saenz			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	PLEDGES, LOANS,	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL (OTHER THAN PLED	CONTRIBUTIONS GES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,650.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURE.	\$
• • • • • • • • • • • • • • • • • • • •	4. TOTAL POLITICAL	EXPENDITURES	\$ 535.84
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CO	ONTRIBUTIONS MAINTAINED AS OF THE LAS	\$ 2,114.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE R	MOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$
18 SIGNATURE I s	wear, or affirm, under penalty of	perjury, that the accompanying report is true	
rec	uired to be reported by me under	Title 15, Election Code.	and correct and includes all informati
		(+ /	
		Landle,	4
			adidate or Officeholder
		Objective of Car	didate of Officenoider
•	Please	complete either option below	•
		property of the state of the st	•
(1) Affidavit			
MOTACH CTANDICE			
NOTARY STAMP/SEAL			
Sworn to and subscribed	pefore me by	this the	day of
	which, witness my hand and seal o		
, to contry v	when, williess my hand and searc	ronice.	
Signature of officer administer	no oath Printed no		
	Finded is	ame of officer administering oath	Title of officer administering oath
(O) U		OR	
(2) Unsworn Declaratio	n		
My name is Ronald K.	Saenz	, , , , , , , , , , , , , , , , , , , ,	May 14 1060
My address is 84 Calle		, and my date of birth is Brownsville TX	
viy addicas is			,
Executed in Cameron	(street) County, State of Texa	no see taka	ate) (zip code) (country)
	County, State of 1. OAC	on the day of July (month)	, 20 <mark>22</mark> (year)
		Janel L	The state of the s
		Signature of Candidat	te/Officeholder (Declarant)

## SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Co			mmission Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,650.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	162.38		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE E: LOANS	\$	, , , , , , , , , , , , , , , , , , , ,		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			535.84	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL O	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	\$			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ITRIBUTIONS	\$	ML- 1129.	
12.	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 At:				
2 FILER NAME Ronald K.	Saenz	3 Filer ID (Ethics Commission Filers)				
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Sandra Saenz	7 Amount of contribution (\$)				
02/11/2022	6 Contributor address; City; State; Zip Code 84 Calle Jacaranda, Brownsville, TX 78520	500.00				
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)						
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)				
03/04/2022	Sandra Saenz  Contributor address; City; State; Zip Code  84 Calle Jacaranda, Brownsville, TX 78520	200.00				
Principal occup	nation / Job title (See Instructions)  Employer (See Instructions)	ctions)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)				
03/04/2022	Guadalupe Flores  Contributor address; City; State; Zip Code  P. O. Box 461241, Laredo, TX 78045	500.00				
Principal occup	ation / Job title (See instructions) Employer (See instruc	otions)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)				
04/06/2022	Martinez/Tijerina, PLLC  Contributor address; City; State; Zip Code  1201 E. Van Buren, Brownsville, TX 78520	1,000.00				
Principal occup	ation / Job title (See Instructions) Employer (See Instruc	etions)				
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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 thi	s form.	1 Total pages Schedule A1:
2 FILER NAME Ronald K			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PA	7 Amount of contribution (\$)	
04/14/2022 6 Contributor address; City; State; Zip Code 84 Calle Jacaranda, Brownsville, TX 78520			300.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date 05/27/2022	Full name of contributor out-of-state PAC (ID#:)  Linda Aurit		Amount of contribution (\$)
00/21/2022	Contributor address; City; 214 Timberview, Boerne	State; Zip Code	150.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC	: (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occupa	ation / Job title (See Instructions)	Employer (See Instruction	ons)

## 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
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/Reimbursernent Office Overhead/Rerital 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 pot listed above)

Travel Out Of District Legal Services 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 (Ethics Commission Filers) Ronald K. Saenz 4 Date 5 Payee name My World Publicity 6 Amount (\$) 7 Payee address; City: State: Zlp Code 281.45 2615 Boca Chica, Brownsville, TX 78520 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Printing Expense T Shirts OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name My World Publicity Amount (\$) Payee address: City; State: Zip Code 92.01 2615 Boca Chica, Brownsville, TX 78520 Category (See Categories listed at the top of this schedule) Description Printing Expense **PURPOSE** Cards 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 Date Payee name 05/27/2022 Sign Solution Amount (\$) Payee address; State; Zip Code 554 Paredes Ave., Suite A, Brownsville, TX 78520 162.38 Category (See Categories listed at the top of this schedule) Description PURPOSE Printing Expense Sign 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED