SHELIA GARCIA BENCE

SEMI-ANNUAL REPORT JANUARY 16, 2024

JUDICIAL CAMPAIGI	FORM JC/OH COVER SHEET PG 1				
The JC/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers)			2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mrs.	FIRST Sheila	МІ	OFFICE USE ONLY	
NAME	NICKNAME	Garcia Benc	suffix e	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 974 E. Harrison, Brownsville Texas 78520			JAN 1/7/2024	
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	(956)	PHONE NUMBER 574-8116	EXTENSION	Date Had Jouvered Transgosting Left P	
6 CAMPAIGN TREASURER	MS/MRS/MR Mr.	FIRST Travis	MI I	Receipt # Amount \$	
NAME	NICKNAME	LAST	SUFFIX	Date Processed	
		Bence	23	Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / St	JITE #; CITY;	STATE; ZIP CODE	
TREASURER ADDRESS	1	yler, Harlingen, Tex		,	
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE (956) 4	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15	30th day before el	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 16	8th day before elec	Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD	Month	Day Year	Month	Day Year	
COVERED	7	/ 01 /2023	THROUGH 12	/31 / 2023	
11 ELECTION	ELECTION DA	1 —	ELECTION TYPE		
	Month Day	Year Primary	Runoff Other Description		
	11/5/	2024 General	Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	n)	
	Probate Coul	rt No. 1 - Judge	PROBATE CC	OURT NO. 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. 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.				
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS		
GO TO PAGE 2					

JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 2** 15 JC/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ **TOTALS TOTAL POLITICAL EXPENDITURES** 1600.0 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 150,000.00 LOAN TOTALS LAST DAY OF THE REPORTING PERIOD **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. didate/Officeholde Please complete either option below: (1) Affidavit NOTARY STAMP/SEAL Sworn to and subscribed before me by Sheila Garcia Bence __ _{day of} <u>J</u>anuary , to certify which, witness my hand and seal of office. **Notary Public** Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath OR (2) Unsworn Declaration (zip code) (country) County, State of nature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	FILER NAME 20 Fi	ler ID (Ethics Commission Filers)
21	SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3,	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$150,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	\$150,000.00 TIONS \$ 1600.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTR	IBUTIONS \$
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 BUSINE	ESS OF C/OH \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	JTIONS \$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED \$

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries∧ The Instruction Guide explains how to €		Other (enter a category not listed above)					
1 Total pages Schedule F1:	2 FILER NAME Sheila Garcia Bence	3	Filer ID (Ethics Commission Filers)					
4 Date	5 Payee name							
12/6/2023	Cameron County Democratic Party							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
1,500.00	975 Ruben Torres Blvd, Suite 2, Brownsville, Texas 78520							
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description						
PURPOSE OF EXPENDITURE	Candidate filing fee							
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, T.	X, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name I	Office sought	Office held					
Date	Рауее лате							
10/6/2023	Sneakers for Students							
Amount (\$)	Payee address;	City;	State; Zip Code					
100.00	514 Paredes Ave., Suite H, Brown	sville, Texas 7852	11					
	Category (See Categories listed at the top of this schedule)	Description						
PURPOSE OF EXPENDITURE	Sponsorship Sneakers for Students - run							
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held					
Date	Payee name							
12/1/2023	Cameron Countie Der	ocratic K	Wy-					
Amount (\$)	Payee address;	effy;	State; Zip Code					
1500.0	821 Box	unsulle	78520					
	Category (See Categories listed at the top of this schedule)	Description						
PURPOSE OF EXPENDITURE	Eling Fee							
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held					
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDE	D					

OUTSTANDING LOANS SCHEDULE L If the requested information is not applicable, DO NOT include this page in the report. Total pages Schedule L: The Instruction Guide explains how to complete this form. 1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sheila Garcia Bence LENDER 4 Name of lender INFORMATION First Community Bank 5 Lender address; City; Zip Code 405 N. Stuart Place, Harlingen, Texas 78552 **GUARANTOR** 6 Name of guarantor INFORMATION Travis L. Bence & Sheila Garcia Bence 7 Guarantor address; City: State: Zip Code not applicable 1018 E Tyler, Harlingen, Texas 78550 Name of lender LENDER INFORMATION Lender address; City; State: Zip Code **GUARANTOR** Name of guarantor INFORMATION Guarantor address; not applicable City; State; Zip Code **LENDER** Name of lender INFORMATION Lender address: Zip Code City: State: **GUARANTOR** Name of guarantor INFORMATION Guarantor address; not applicable City; State; Zip Code LENDER Name of lender INFORMATION Lender address; City; State; Zip Code **GUARANTOR** Name of guarantor INFORMATION Guarantor address; City; State; Zip Code not applicable ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS (JUDICIAL)

SCHEDULE E(J)

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

			1 Total pages Schedule E(J):		
The In	struction Guide explains how to complete this fo	orm.	1 Total pages Schedule E(J):		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sheila Garcia Be	ence				
4 TOTAL OF UNI	TEMIZED LOANS		\$		
5 Date of loan	7 Name of lender ul-ol-state PAC (II	D#:)	9 Loan Amount (\$)		
10/16/2018 [.]	First Community Bank		150,000.00		
6 Is lender a financial Institution?	nancial 405 N. Stuart Place, Harlingen, Texas 78552		10 Interest rate 7.000%		
Y N			11 Maturity date		
12 Lender's Principal	12 Lender's Principal Occupation 13 Lender's Job Title		-		
14 Lender's Employer/	Law Firm	15 Law Firm of lender's spouse (if any)			
16 If lender is a child,	law firm of parent(s) (if any)				
17 Description of Colla	tteral 25, Blk 47 Padre Subdivision	Check if person account (See Ir	nal funds were deposited into political instructions)		
19 GUARANTOR	20 Name of guarantor		22 Amount Guaranteed (\$)		
INFORMATION	Travis L. Bence & Sheila García Bence				
	21 Guarantor address; City; State; Zip Code 1018 E Tyler, Harlingen, Texas 78550		\$150,000.00		
not applicable 23 Guarantor's Princip	al Occupation	24 Guarantor's Job Title			
·		Type text here			
25 Guarantor's Employ		26 Law Firm of guarantor's spouse (if any)			
Cameron County	/ (Sheila)	Bence & Associates, LLC (Travis)			
27 If guarantor is a child, law firm of parent(s) (if any)					
	ATTACH ADDITIONAL COPIES O				