JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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 NAME	MS/MRS/MR EIRST MY IRAVIS NICKNAME LAST ER NS	SUFFIX	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; Po Box 2511 \ AREA CODE PHONE NUMBER (361) 573 554	EXTENSION	Date Hand-dell Assessment Source Postment (ed	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MY Gene NICKNAME LAST	MI SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY; STATE; Dr. Victoria TX	zip gode 77904	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (361) 576 9525	EXTENSION		
9 REPORT TYPE	July 15 30th day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year THRO	- 7 / 15 //	Year 18	
11 ELECTION	Month Day Year Primary Q Q General	ELECTION TYPE Runoit Other Description Special	State of Aller and a first of	
12 OFFICE	County Courtat Law J Victorialo.	County Cour		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME		115	5 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	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. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
,a					
Additional Pages					
·		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION	1. TOTAL F	L POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI	v a		
TOTALS	PLEDGE	S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$ \$		
	2. TOTAL	POLITICAL CONTRIBUTIONS			
	(OTHER	THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$		
EXPENDITURE	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,		\$		
TOTALŠ		ITEMIZED	Φ		
	4. TOTAL POLITICAL EXPENDITURES		\$		
CONTRIBUTION BALANGE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 57 <u>41</u>		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		#E \$ 1500°		
18 AFFIDAVIT	700-710-				
REGINA PAYTON 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. Notary ID 47747 10					
		Signature of Cand	idate or Officeholder		
AFFIX NGTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said <u>/rav:s Ernst</u> , this the <u>/3-th</u>					
day of $\frac{1}{8}$, to certify which, witness my hand and seal of office.					
Reina Parta Regine Payton Notan Public					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

OUTSTANDING LOANS SCHEDULE L 1 Total pages Schedule L: The Instruction Guide explains how to complete this form. Filer ID (Ethics Commission Filers) 2 FILER NAME LENDER INFORMATION Zlp Code GUARANTOR INFORMATION not applicable 7 Guarantor address; Name of lender LENDER INFORMATION Lender address; City; State; Zip Code GUARANTOR Name of guarantor INFORMATION not applicable Zip Code Guarantor address; City; State; LENDER Name of lender INFORMATION Lender address; Zip Code City: GUARANTOR Name of guarantor INFORMATION not applicable Guarantor address; City: State; Zip Code LENDER Name of lender INFORMATION Lender address; City; Zip Code State; Name of guarantor **GUARANTOR** INFORMATION not applicable Guarantor address; City; State: Zip Code ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED