# 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 Commission Filers)

2 Total pages filed: 11

**OFFICE USE ONLY**

Date Received

RECEIVED
OCT 07 2019
CITY OF MESQUITE
CITY SECRETARY

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

**3 CANDIDATE / OFFICEHOLDER NAME**

MS / MRS / MR: ☒ | FIRST: Sergio | MI:

NICKNAME: | LAST: Garcia | SUFFIX:

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

223 E. Kimbrough st.
Mesquite, Tx 75149

**5 CANDIDATE/ OFFICEHOLDER PHONE**

AREA CODE: (214) | PHONE NUMBER: 440-7561 | EXTENSION:

**6 CAMPAIGN TREASURER NAME**

MS / MRS / MR: | FIRST: Debbie | MI:

NICKNAME: | LAST: Morgan | SUFFIX:

**7 CAMPAIGN TREASURER ADDRESS** (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

223 E. Kimbrough st.
Mesquite, Tx 75149

**8 CAMPAIGN TREASURER PHONE**

AREA CODE: (214) | PHONE NUMBER: 236-8643 | EXTENSION:

**9 REPORT TYPE**

- ☐ January 15
- ☒ 30th day before election
- ☐ Runoff
- ☐ 15th day after campaign treasurer appointment (Officeholder Only)
- ☐ July 15
- ☐ 8th day before election
- ☐ Exceeded $500 limit
- ☐ Final Report (Attach C/OH - FR)

**10 PERIOD COVERED**

Month Day Year: 07/01/2019 THROUGH Month Day Year: 09/26/2019

**11 ELECTION**

ELECTION DATE: Month Day Year: 11/05/2019

ELECTION TYPE:
- ☐ Primary
- ☐ Runoff
- ☐ Other Description
- ☒ General
- ☐ Special

**12 OFFICE**

OFFICE HELD (if any):

**13** OFFICE SOUGHT (if known): Mesquite City Cancil Place 5

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH COVER SHEET PG 2**

**14** C/OH NAME Sergio Garcia

**15** 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 / 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 TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17** CONTRIBUTION TOTALS

| | | |
|---|---|---|
| | 1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | $ 340.00 |
| | **2. TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 1946.85 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED | $ 76.03 |
| | **4. TOTAL POLITICAL EXPENDITURES** | $ 1513.58 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | $ 433.27 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ |

**18** AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
CONNIE LITTLE
My Notary ID # 8381155
Expires December 18, 2021

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said SERGIO GARCIA, this the 7th day of October, 20 19, to certify which, witness my hand and seal of office.

| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |
|---|---|---|
| Connie L. Little | Connie L Little | Admin Aide |

# SUBTOTALS - C/OH

**FORM C/OH**
**COVER SHEET PG 3**

| 19 FILER NAME | 20 Filer ID (Ethics Commission Filers) |
|---|---|
| Sergio Garcia | |

| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
|---|---|---|
| 1. | ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | $ 1565.50 |
| 2. | ☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | $ 381.35 |
| 3. | ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS | $ — |
| 4. | ☐ SCHEDULE E: LOANS | $ — |
| 5. | ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | $ 1513.58 |
| 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/OH | $ — |
| 11. | ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | $ — |
| 12. | ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | $ — |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1: 3

2 FILER NAME: Sergio Garcia

3 Filer ID (Ethics Commission Filers):

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|
| 7/11/19 | Sergio Garcia<br>223 E. Kimbrough St. Mesquite, TX 75149 | $75.00 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Member Guest Service | Dallas Athletic Club |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 8/19/19 | Suzanne Smith<br>3921 Hawthorne Dallas, TX 75219 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Consultant | Social Impact Architects |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 8/22/19 | Sergio Garcia<br>223 E. Kimbrough St. Mesquite TX 75149 | $50.25 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Member Guest Service | Dallas Athletic Club |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 8/24/19 | Carol Donovan<br>659 Malcolm Dr. Dallas, TX 75214 | $200.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney-Mediator | Carol Crabtree Donovan, PC |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1:

2 FILER NAME Sergio Garcia

3 Filer ID (Ethics Commission Filers)

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) |
|---|---|---|
| 8/29/19 | Ali Raza<br>240 W. Bruton Ln Mesquite, TX 75149 | $250.00 |

| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|---|
| Jeweler | Self |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 9/3/19 | Anthony Eiland<br>5787 S Hampton Rd #270 Dallas TX 75232 | $250.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | The Eiland Law Firm |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 9/8/19 | Jeffrey Payne<br>2641 Heatherwood Dr. Dallas, TX 75228 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Business Owner | TMM Corp. dba The Dallas Eagle |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) |
|---|---|---|
| 9/8/19 | Martin Hoffman<br>P.O. Box 59642 Dallas, TX 75229 | $100.00 |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Judge | State of Texas |

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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1:

2 FILER NAME: Sergio Garcia

3 Filer ID (Ethics Commission Filers)

4 Date: 9/19/19

5 Full name of contributor: Sergio Garcia ☐ out-of-state PAC (ID#:_____)

6 Contributor address; City; State; Zip Code: 223 E. Kimbrough St. Mesquite Tx 75149

7 Amount of contribution ($): $100.25

8 Principal occupation / Job title (See Instructions): Member Guest Service

9 Employer (See Instructions): Dallas Athletic Club

Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of contribution ($)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of contribution ($)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of contribution ($)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A2: 1

2 FILER NAME Sergio Garcia

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS $ 381.35

| 5 Date | 6 Full name of contributor ☐ out-of-state PAC (ID#:_____) | 8 Amount of Contribution $ | 9 In-kind contribution description |
|---|---|---|---|
| 9/26/19 | Debbie Morgan<br>7 Contributor address; City; State; Zip Code<br>223 E. Kimbrough st. Mesquite, TX 75149 | 381.35 | Sign stands/Poles<br>☐ Check if travel outside of Texas. Complete Schedule T. |

| | |
|---|---|
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)<br>Retired | 11 Employer (FOR NON-JUDICIAL) (See Instructions) |
| 12 Contributor's principal occupation (FOR JUDICIAL) | 13 Contributor's job title (FOR JUDICIAL) (See Instructions) |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution $ | In-kind contribution description |
|---|---|---|---|
| 10/7/2019 | ~~Debra D. Morgan~~<br>Contributor address; City; State; Zip Code<br>~~223 E. Kimbrough st. Mesquite, TX 75149~~ | | ☐ Check if travel outside of Texas. Complete Schedule T. |

| | |
|---|---|
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) | Employer (FOR NON-JUDICIAL) (See Instructions) |
| Contributor's principal occupation (FOR JUDICIAL) | Contributor's job title (FOR JUDICIAL) (See Instructions) |
| Contributor's employer/law firm (FOR JUDICIAL) | Law firm of contributor's spouse (if any) (FOR JUDICIAL) |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | |

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**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**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 F1: | 2 FILER NAME Sergio Garcia | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 7-12-19 | 5 Payee name Epson | |
| 6 Amount ($) $14.06 | 7 Payee address; City; State; Zip Code 3840 Kilroy Airport Way Long Beach, CA 90806 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) INK for printer | (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date 7-22-19 | Payee name Dallas County Elections Dept. | |
| Amount ($) $50.00 | Payee address; City; State; Zip Code 2377 N. Stemmons #820 Dallas, TX 75207 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Voter Reg. list Printout | Description ☐ 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 |

| | | |
|---|---|---|
| Date 8-16-19 | Payee name Officemax | |
| Amount ($) $34.60 | Payee address; City; State; Zip Code 1515 Town East suite 112 Mesquite TX 75150 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) nametags | Description ☐ 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 |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**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 F1: | 2 FILER NAME Sergio Garcia | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8-17-19 | 5 Payee name Signs 4U | |
| 6 Amount ($) $119.00 | 7 Payee address; City; State; Zip Code 4400 Samvell Mesquite TX 75149 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing | (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date 8-26-19 | Payee name Bull's Pen | |
| Amount ($) $120.82 | Payee address; City; State; Zip Code 717 N. Bryan-Beltline Mesquite, TX 75149 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Campaign Kickoff | Description ☐ 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 |

| | | |
|---|---|---|
| Date 9-1-19 | Payee name Mid-Continent Printing Co. Inc. | |
| Amount ($) $43.30 | Payee address; City; State; Zip Code 701 HWY 352 Mesquite TX 75149 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing | Description ☐ 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 |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**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 F1: | 2 FILER NAME Sergio Garcia | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| 4 Date 9-4-19 | 5 Payee name Texas Demcratic Party | |
| 6 Amount ($) $235.00 | 7 Payee address; City; State; Zip Code 1106 Lavaca st. #100 Austin, Tx 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) VAN Database Access | (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| Date | Payee name |
|---|---|
| 9-11-19 | Signs 4 U |
| Amount ($) $440.00 | Payee address; City; State; Zip Code 4400 Samwell Mesquite TX 75149 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Signs / Description ☐ 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 |

| Date | Payee name |
|---|---|
| 9-19-19 | Mid-Continent Printing Co. Inc. |
| Amount ($) $40.43 | Payee address; City; State; Zip Code 701 HWY 352 Mesquite, TX 75149 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing / Description ☐ 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 |

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
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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 F1: | 2 FILER NAME Sergio Garcia | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9-26-19 | 5 Payee name Signs for U | |
| 6 Amount ($) $439.00 | 7 Payee address; City; State; Zip Code 4400 Samvell Mesquite, TX 75149 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date | Payee name | |
| Amount ($) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description ☐ 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 |

| | | |
|---|---|---|
| Date | Payee name | |
| Amount ($) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description ☐ 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 |

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