

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: <div style="text-align: right; font-size: 2em;">5</div>																						
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:30%; border-bottom: 1px solid black;">Mr.</td> <td style="width:15%; font-size: 8px;">FIRST</td> <td style="width:30%; border-bottom: 1px solid black;">Emett</td> <td style="width:10%; font-size: 8px;">MI</td> <td style="width:10%;"></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td></td> <td style="font-size: 8px;">LAST</td> <td></td> <td style="font-size: 8px;">SUFFIX</td> <td></td> </tr> <tr> <td colspan="6" style="text-align: center; padding-top: 10px;">Alvarez</td> </tr> </table>	MS / MRS / MR	Mr.	FIRST	Emett	MI		NICKNAME		LAST		SUFFIX		Alvarez						<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p style="font-size: 8px; margin: 0;">Date Received JUL 12 2019</p> <p style="font-size: 1.5em; font-weight: bold; margin: 0;">RECEIVED</p> <p style="font-size: 1.2em; margin: 0;">City Secretary</p> <p style="font-size: 1.5em; margin: 0;">1:37pm</p> <p style="font-size: 8px; margin: 0;">Date Hand-delivered or Date Postmarked JUL 12 2019</p> <p style="font-size: 8px; margin: 0;">Date Processed</p> <p style="font-size: 8px; margin: 0;">Date Imaged</p> </div>					
MS / MRS / MR	Mr.	FIRST	Emett	MI																					
NICKNAME		LAST		SUFFIX																					
Alvarez																									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:30%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td style="border-bottom: 1px solid black;">PO Box 282</td> <td></td> <td style="border-bottom: 1px solid black;">Victoria Tx</td> <td></td> <td style="border-bottom: 1px solid black;">77902</td> </tr> </table> <p><input type="checkbox"/> Change of Address</p>			ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	PO Box 282		Victoria Tx		77902												
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7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:25%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td style="border-bottom: 1px solid black;">2001 E Sabine Street, Suite 109, Victoria, Tx</td> <td></td> <td style="border-bottom: 1px solid black;">Victoria, Tx</td> <td></td> <td style="border-bottom: 1px solid black;">77901</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	2001 E Sabine Street, Suite 109, Victoria, Tx		Victoria, Tx		77901												
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> <td style="width:10%;"></td> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> </tr> <tr> <td style="border-bottom: 1px solid black;">1</td> <td style="border-bottom: 1px solid black;">/ 16</td> <td style="border-bottom: 1px solid black;">/ 19</td> <td style="text-align: center;">THROUGH</td> <td style="border-bottom: 1px solid black;">7</td> <td style="border-bottom: 1px solid black;">/ 15</td> <td style="border-bottom: 1px solid black;">/ 19</td> </tr> </table>			Month	Day	Year		Month	Day	Year	1	/ 16	/ 19	THROUGH	7	/ 15	/ 19								
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11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 8px;">ELECTION DATE</td> <td colspan="3" style="font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> <td style="width:10%;"><input type="checkbox"/> Primary</td> <td style="width:10%;"><input type="checkbox"/> Runoff</td> <td style="width:10%;"><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;">/</td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	/	/	/	<input type="checkbox"/> General	<input type="checkbox"/> Special							
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12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)																							
	None	None																							

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Emett Alvarez

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

COMMITTEE NAME

GENERAL

SPECIFIC

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

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 100.00

4. TOTAL POLITICAL EXPENDITURES

\$ 1,170.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 144.38

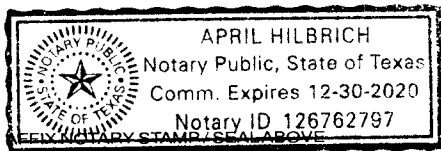
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 9,500.00

18 AFFIDAVIT

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.



Emett Alvarez

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Emett Alvarez, this the 12th day of July, 20 19, to certify which, witness my hand and seal of office.

April Hilbrich

Signature of officer administering oath

April Hilbrich

Printed name of officer administering oath

Notary

Title of officer administering oath

SUBTOTALS - C/OH

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

19 FILER NAME <i>Eme H Alvarez</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ <i>1,170.00</i>
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>2</i>	2 FILER NAME <i>Emett Alvarez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>2-2-19</i>	5 Payee name <i>Revista de Victoria</i>
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6 Amount (\$) <i>270.00</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>PO Box 1412 Victoria, TX 77902</i>
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Eric Holguin</i>	Office sought <i>U.S. Congress</i>	Office held <i>none</i>
--	--	---------------------------------------	----------------------------

Date <i>2-26-19</i>	Payee name <i>Revista de Victoria</i>
------------------------	--

Amount (\$) <i>212.50</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>PO Box 1412 Victoria, TX 77902</i>
--	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Rawley McCoy</i>	Office sought <i>Mayor</i>	Office held <i>none</i>
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Date <i>4-4-19</i>	Payee name <i>Revista de Victoria</i>
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Amount (\$) <i>212.50</i> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>PO Box 1412 Victoria, TX 77902</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Rawley McCoy</i>	Office sought <i>Mayor</i>	Office held <i>none</i>
---	--	-------------------------------	----------------------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 2		2 FILER NAME Emett Alvarez		3 Filer ID (Ethics Commission Filers)	
4 Date 4-9-19		5 Payee name Revista de Victoria			
6 Amount (\$) 175.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code Po Box 1412 Victoria, Tx 77902			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Dr. Vic Morgan		Office sought mayor	
				Office held none	
Date 4-23-19		Payee name Revista de Victoria			
Amount (\$) 75.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code Po Box 1412 Victoria, Tx 77902			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Justin Urbano		Office sought City Council	
				Office held none	
Date 4-23-19		Payee name Majic Tejano 95.9			
Amount (\$) 300.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2001 E Sabine Street, Suite 101 Victoria, TX 77901			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Rawley McCoy		Office sought mayor	
				Office held none	

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