

# 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: <u>15</u> <u>28</u> <u>44</u>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI <u>MR</u> <u>Ruben</u> <u></u>		<b>OFFICE USE ONLY</b>  Date Received  <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>RECEIVED</b>  <b>JUL 16 2018</b>  <u>DS</u> </div>
	NICKNAME      LAST      SUFFIX <u>Becerra</u>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE <u>208 E Mimosa Cir.</u> <u>San Marcos, TX 78666</u>		Date Hand-delivered or Date Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <u>(512) 787-4902</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI <u>Mr.</u> <u>Les</u> <u></u>		Receipt #      Amount \$
	NICKNAME      LAST      SUFFIX <u>Carnes</u>		Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE <u>208 E Mimosa Cir.</u> <u>San Marcos, TX 78666</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <u>(512) 787-4902</u> <u>(512) 923-2964</u>		
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>		
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div>           Month    Day    Year  <u>02</u> / <u>27</u> / <u>2018</u> </div> <div>THROUGH</div> <div>           Month    Day    Year  <u>07</u> / <u>15</u> / <u>2018</u> </div> </div>		
11 ELECTION	<div style="display: flex;"> <div style="flex: 1;">           ELECTION DATE            Month    Day    Year  <u>11</u> / <u>04</u> / <u>2018</u> </div> <div style="flex: 1;">           ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special         </div> </div>		
12 OFFICE	OFFICE HELD (if any)      13 OFFICE SOUGHT (if known)  <u>Hays County Judge</u>		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

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)

\$ 7,279.00

EXPENDITURE  
TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 9,618.58

CONTRIBUTION  
BALANCE

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

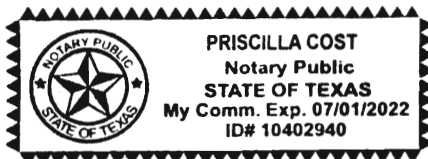
\$ 5,291.72

OUTSTANDING  
LOAN TOTALS

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

\$ 12,443.00

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.

*[Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ruben Becerra, this the 12 day of July, 2018, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

*Priscilla Cost*

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**

Ruben Becerra

**20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,279.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5,500.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 7,518.58
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,100.00
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	\$ 7,518.58
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	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

1 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 4-13-18	5 Full name of contributor Tyler Trejo <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 105 Howard Wallace, Deyine, TX 78016	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions)
Date 4-14-18	Full name of contributor Christopher Cardoza <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1132 Haynes, San Marcos, TX 78666	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-16-18	Full name of contributor Deborah Cardwell <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 205 Hoya Ln., San Marcos, TX 78666	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-22-18	Full name of contributor Rio Rodriguez <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 503 Teron Dr., San Marcos, TX 78666	Amount of contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2025

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 3-20-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cristian Becerra 6 Contributor address; City; State; Zip Code 102 Norcrest, San Marcos, TX 78666	7 Amount of contribution (\$) \$ 100.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions)
Date 4-10-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Raoul Belleau Contributor address; City; State; Zip Code 291 Brunson Lane, Wimberley, TX 78676	Amount of contribution (\$) \$ 60.00
Principal occupation / Job title (See Instructions) Electrical Engineer		Employer (See Instructions)
Date 4-13-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <del>Trenda</del> Trenadee Entrichel Contributor address; City; State; Zip Code 175 Eagle Brook, Buda, TX 78610	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Esthetician		Employer (See Instructions)
Date 4-13-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carina Boston Pinales Contributor address; City; State; Zip Code 147 Dolly St., San Marcos, TX 78666	Amount of contribution (\$) \$ 8.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**  
3 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 3-3-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles Campise 6 Contributor address; City; State; Zip Code 5401 Hilliard Rd., San Marcos, TX 78666	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 3-3-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rosemary Campise Contributor address; City; State; Zip Code 5401 Hilliard Rd., San Marcos, TX 78666	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired.		Employer (See Instructions)
Date 3-10-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Raoul Belleau Contributor address; City; State; Zip Code 291 Brunson Ln., Wimberly, TX 78676	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Electrical Engineer		Employer (See Instructions)
Date 3-20-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ruben Becerra Jr. Contributor address; City; State; Zip Code 102 Norcrest, San Marcos, TX 78666	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

4025

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 2-28-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dr. Michael Sanchez 6 Contributor address; City; State; Zip Code 1118 Amberwood Loop, Kyle, TX 78640-5754	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) SAZ
Date 2-28-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rosemary Campise Contributor address; City; State; Zip Code 5401 Hilliard Rd., San Marcos, TX 78666	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2-28-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cora C. Mendez Contributor address; City; State; Zip Code 26411 Dancing Bear, San Antonio, TX 78260	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions)
Date 3-1-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Richard M. Mendez Contributor address; City; State; Zip Code 3511 Huntwick Ln., San Antonio, TX 78230	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Medical auditor		Employer (See Instructions) SMS
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

50425

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-7-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Art & Melissa Millecam 6 Contributor address; City; State; Zip Code 111 W Holland St., San Marcos, TX 78666	7 Amount of contribution (\$) \$ 100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 5-16-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Don & Betsy Singleton Contributor address; City; State; Zip Code 96 Elm Hill Ct., San Marcos, TX 78666	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 6-31-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cristina Burguete Contributor address; City; State; Zip Code 13018 Fairbark Crossing, San Antonio, TX 78231	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions)
Date 6-6-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Devonet Clarkson Contributor address; City; State; Zip Code 7254 Blanco Rd. #202, San Antonio, TX 78216	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions) Clinical Dir.		Employer (See Instructions) SMS
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

6 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 7-10-18	5 Full name of contributor Marian Ferrar <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 102 Norcrest Dr, San Marcos TX 78666	7 Amount of contribution (\$) \$ 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7-15-18	Full name of contributor Tiffany Hernandez <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 162 Crooked Creek, Buda, TX 78610	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions) Apt. manager		Employer (See Instructions)
Date 7-15-18	Full name of contributor Claudia Becerra <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 162 Crooked Creek, Buda, TX 78610	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-15-18	Full name of contributor Cora C Mendez <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 26411 Dancing Bear, San Antonio, TX 78240	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 7-10-18	5 Full name of contributor John Redding <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 123 N Endicott, San Marcos, TX 78666	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) baker		9 Employer (See Instructions)
Date 7-10-18	Full name of contributor Jose Dylan Becerra <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 328 N LBJ Dr, San Marcos, TX 78666	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) baker		Employer (See Instructions)
Date 7-10-18	Full name of contributor Mathew Heinrich <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1350 N LBJ Dr. #634, San Marcos, TX 78666	Amount of contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions)
Date 7-10-18	Full name of contributor Zachary Manzanares <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 2824 Rolling Oaks, San Marcos, TX 78666	Amount of contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COOK		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

8029

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 7-7-18	5 Full name of contributor Israel Najera <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; 10800 Redmond Rd., Austin, TX 78739 City; State; Zip Code	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Counselor		9 Employer (See Instructions)
Date 7-13-18	Full name of contributor Frank Pinkerton <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 5401 Hilliard Rd., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 7-14-18	Full name of contributor Bruce Pinkerton <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 5401 Hilliard Rd., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$ 40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 7-12-18	Full name of contributor JoAnn P. Mauk <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 420 North St. # 207, San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$ 15.00
Principal occupation / Job title (See Instructions) CSR		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

90125

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME **Ruben Becerra**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7-7-18**

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
**Ruth Sullivan**

7 Amount of contribution (\$)  
**\$ 15.00**

6 Contributor address; City; State; Zip Code  
**1801 Fair Oaks Dr., Austin, TX 78745**

8 Principal occupation / Job title (See Instructions)  
**Retired**

9 Employer (See Instructions)

Date  
**7-7-18**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
**Ralph Ruiz**

Amount of contribution (\$)  
**\$ 20.00**

Contributor address; City; State; Zip Code  
**224 Crestview Dr., San Antonio, TX 78201**

Principal occupation / Job title (See Instructions)  
**retired**

Employer (See Instructions)

Date  
**7-7-18**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
**Carolyn & Jake Campise**

Amount of contribution (\$)  
**\$ 50.00**

Contributor address; City; State; Zip Code  
**2627 So Cherry St. #259, Tomball, TX 77375**

Principal occupation / Job title (See Instructions)  
**retired**

Employer (See Instructions)

Date  
**7-8-18**

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
**Daniel Shulman**

Amount of contribution (\$)  
**\$10.00**

Contributor address; City; State; Zip Code  
**4150 River Road, New Braunfels, TX 78132**

Principal occupation / Job title (See Instructions)  
**machinist**

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.



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-29-18	5 Full name of contributor Charles Campise <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 5401 Hilliard Rd., San Marcos, TX 78666	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 6-20-18	Full name of contributor Clementine Cantu <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 305 Oak Ridge, San Marcos, TX 78666	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired #		Employer (See Instructions)
Date 6-29-18	Full name of contributor Kristen Alvarez <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 312 N LBJ Dr., San Marcos, TX 78666	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self-employed.		Employer (See Instructions)
Date 6-30-18	Full name of contributor Armando D. & Carol Frank <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1208 Belyin St., San Marcos, TX 78666	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) # not employed		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

11 of 25

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

7-1-18

5 Full name of contributor

Heiko Stang

☐ out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

\$10.00

6 Contributor address;

City; State; Zip Code

380 Turkey Hollow, Wimberley, TX 78676

8 Principal occupation / Job title (See Instructions)

not employed

9 Employer (See Instructions)

Date

7-1-18

Full name of contributor

Nerissa Oden

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

121 Canyon Gap Road, Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Author

Employer (See Instructions)

Self

Date

7-1-18

Full name of contributor

Tara Cate

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

\$20.00

Contributor address;

City; State; Zip Code

902 Silcantu Dr., Austin, TX 78748

Principal occupation / Job title (See Instructions)

Sales

Employer (See Instructions)

medi

Date

7-1-18

Full name of contributor

Miguel Pina

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

\$10.00

Contributor address;

City; State; Zip Code

924 E 51st St., Austin, TX 78751

Principal occupation / Job title (See Instructions)

mortgage loan officer

Employer (See Instructions)

The Dawn Rush Dotson Mtg. Team

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

120125

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-30-18	5 Full name of contributor Kathi Conner 6 Contributor address; City; State; Zip Code 2569 Deer Stand Loop, San Marcos, TX 78666	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Coach		9 Employer (See Instructions) TXST
Date 7-1-18	Full name of contributor Kara Yocom Contributor address; City; State; Zip Code 1350 Morningwood Dr., San Marcos, TX 78666	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 7-1-18	Full name of contributor Miguel Sauzo Contributor address; City; State; Zip Code 102 Maxwell Way, Austin, TX 78738	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) The Sauzo Legal Group, PLLC
Date 7-1-18	Full name of contributor Anita Collins Contributor address; City; State; Zip Code 923 FM 2439, San Marcos, TX 78666	Amount of contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

130425

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

6-30-18

5 Full name of contributor

Suad Hooper

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address;

City; State; Zip Code

118 Cypress Court, San Marcos, TX 78666

8 Principal occupation / Job title (See Instructions)

Education

9 Employer (See Instructions)

CAE

Date

6-30-18

Full name of contributor

Jeb Boyd

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

5423 Shoalwood Austin, TX 78756

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

6-30-18

Full name of contributor

Bobbie Garza-Hernandez

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 25.00

Contributor address;

City; State; Zip Code

P.O. Box 3911, Austin, TX 78764-3911

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Pink Consulting

Date

6-30-18

Full name of contributor

Ivan Friedman

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 10.00

Contributor address;

City; State; Zip Code

102 Juniper Juniper Ct., San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

attorney

Employer (See Instructions)

Self

**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

14 of 25

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

6-30-18

5 Full name of contributor

Joe Becerra

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address;

City; State; Zip Code

10810 Stone Oak, Brownsville, TX 78521

8 Principal occupation / Job title (See Instructions)

Self-employed

9 Employer (See Instructions)

Date

6-30-18

Full name of contributor

Lda Miller

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 250.00

Contributor address;

City; State; Zip Code

811 W Hopkins, San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

Nurse

Employer (See Instructions)

UHC

Date

6-30-18

Full name of contributor

Brandon Beck

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 25.00

Contributor address;

City; State; Zip Code

114 Chaparral Street, San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

teacher

Employer (See Instructions)

Date

6-30-18

Full name of contributor

David Joiner

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 100.00

Contributor address;

City; State; Zip Code

108 Laurel Ridge, San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

teacher

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.



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

18.225

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-8-18	5 Full name of contributor Bert Garza 6 Contributor address; 556 Clear Springs Hollow, Buda, TX 78610 City; State; Zip Code	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Software developer		9 Employer (See Instructions) UFCU
Date 6-8-18	Full name of contributor Kurt Waldhauser Contributor address; 1103 Earle St., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 6-10-18	Full name of contributor Raoul Belleau Contributor address; 291 Brunson Lane, Wimberley, TX 78676 City; State; Zip Code	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Electrical engineer		Employer (See Instructions)
Date 6-30-18	Full name of contributor Jayme Sutton Contributor address; 1932 Los Santos Dr., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

16 of 25

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

7-1-18

5 Full name of contributor

Jim Nelson

☐ out-of-state PAC (ID#)

6 Contributor address;

City; State; Zip Code

130 B Utterback, Kyle, TX 78640

7 Amount of contribution (\$)

\$ 25.00

8 Principal occupation / Job title (See Instructions)

Retired.

9 Employer (See Instructions)

Date

6-7-18

Full name of contributor

Lea Rice

☐ out-of-state PAC (ID#)

Contributor address;

City; State; Zip Code

104 W Laurel Ln., San Marcos TX 78666

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Nurse Auditor

Employer (See Instructions)

Humana

Date

6-7-18

Full name of contributor

Alexander Villalobos

☐ out-of-state PAC (ID#)

Contributor address;

City; State; Zip Code

P.O. Box 1630, Kyle, TX 78640

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Police officer

Employer (See Instructions)

Date

6-7-18

Full name of contributor

Leslie Carnes

☐ out-of-state PAC (ID#)

Contributor address;

City; State; Zip Code

351 Limestone Ln., Driftwood, TX 78619

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Criminal Analyst

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.

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

17 of 28

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-7-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Snyder 6 Contributor address; City; State; Zip Code 350 Mistletoe Lane, Kyle, TX 78640	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 6-7-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharri Levine Boyett Contributor address; City; State; Zip Code 2431 Oak Haven Dr., San Marcos, TX	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 6-7-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JoAnn Mauk Contributor address; City; State; Zip Code 2326 San Antonio, San Marcos, TX 78666	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) storage rental manager		Employer (See Instructions)
Date 6-7-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Pryor Contributor address; City; State; Zip Code P.O. Box 417, San Marcos, TX 78666	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

18 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 6-7-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lynny Davis Moore 6 Contributor address; City; State; Zip Code 1513 Marlton St., San Marcos, TX 78666	7 Amount of contribution (\$) \$ 100.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions)
Date 6-4-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Donna Haschke Contributor address; City; State; Zip Code 308 Fox Hollow, Buda, TX 78610	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 6-7-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paul & Linda Parrish Contributor address; City; State; Zip Code 531 Sad Willow Pass Driftwood, TX 78619	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 6-7-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kathryn McCarty Contributor address; City; State; Zip Code 621 W San Antonio, San Marcos, TX 78666	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

19 of 25

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

6-6-18

5 Full name of contributor

☐ out-of-state PAC (ID#:

Heiko Stang

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City; State; Zip Code

380 Turkey Hollow, Wimberley, TX 78676

8 Principal occupation / Job title (See Instructions)

retired

9 Employer (See Instructions)

Date

6-6-18

Full name of contributor

☐ out-of-state PAC (ID#:

Jimmy Allen Hall

Amount of contribution (\$)

\$75.00

Contributor address;

City; State; Zip Code

401 Green Acres Drive, Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-7-18

Full name of contributor

☐ out-of-state PAC (ID#:

Shirley Ogletree

Amount of contribution (\$)

\$25.00

Contributor address;

City; State; Zip Code

812 Hillier St., San Marcos TX 78666

Principal occupation / Job title (See Instructions)

Professor

Employer (See Instructions)

TXST

Date

6-7-18

Full name of contributor

☐ out-of-state PAC (ID#:

Gloria deLeon

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

861 Arroyo Ranch Rd., Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Non-profit exec / writer

Employer (See Instructions)

NHI

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

20 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 5-10-18	5 Full name of contributor Raoul Belleau 6 Contributor address; 291 Brunson Ln., Wimberley, TX 78676	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Electrical Engineer		9 Employer (See Instructions)
Date 5-17-18	Full name of contributor Peter Sprouse Contributor address; 600 Elliott Ranch Rd. Buda, TX 78610	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Biologist		Employer (See Instructions)
Date 6-3-18	Full name of contributor Rosemary Nelson Contributor address; 130 B Utterback, Kyle, TX 78640	Amount of contribution (\$) \$ 25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 6-4-18	Full name of contributor Steven Kling Contributor address; 1011 Oak Meadow, Dripping Springs, TX 78620	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Home Away
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

21 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 3-21-18	5 Full name of contributor Margo Case <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 2876 Paso del Robles, San Marcos, TX 78666	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-26-18	Full name of contributor Roberto Molina <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 4419 FM 1978, San Marcos, TX 78666	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Hays Co.
Date 5-15-18	Full name of contributor Frank Arredondo <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 904 Stagecoach Trl., San Marcos, TX 78666	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Exec. Dir. Housing Auth.		Employer (See Instructions)
Date 6-7-18	Full name of contributor Linda A. Rodriguez <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 105 Tonkawa Cove, Kyle, TX 78640	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired Judge / attorney		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

22 of 25

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 3-3-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles Campise 6 Contributor address; City; State; Zip Code 5401 Hilliard Rd., San Marcos, TX 78666	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 4-14-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carol Cape Overall Contributor address; City; State; Zip Code 113 Camero Way, San Marcos, TX 78666	Amount of contribution (\$) \$ 25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 4-14-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brian Baker Contributor address; City; State; Zip Code P.O. Box 2630, San Marcos, TX 78666	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 4-21-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Peter & Carolyn Rhodes Contributor address; City; State; Zip Code 103 Norcrest Dr., San Marcos, TX 78666	Amount of contribution (\$) \$ 175.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

23.125

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 7-7-18	5 Full name of contributor Richard Mendez <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 26411 Dancing Bear, San Antonio, TX 78240	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired principal		9 Employer (See Instructions)
Date 7-7-18	Full name of contributor Leslie Carnes <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 351 Limestone Lane, Driftwood, TX 78619	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Criminal analyst		Employer (See Instructions) Travis Co. Constable Pct. 3
Date 7-8-18	Full name of contributor Bert Garza <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 556 Clear Springs Hollow, Buda, TX 78610	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) UFCU
Date 7-10-18	Full name of contributor Raoul Belleau <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 291 Brunson Lane, Wimberley, TX 78676	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Electrical engineer		Employer (See Instructions) Teradyne Inc.
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

240 + 25

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ruben Becerra

3 Filer ID (Ethics Commission Filers)

4 Date

7-1-18

5 Full name of contributor

Annamarie Hedman

☐ out-of-state PAC (ID#:

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City; State; Zip Code

554 Cantera Ridge, New Braunfels, TX 78132

8 Principal occupation / Job title (See Instructions)

Skincare business owner

9 Employer (See Instructions)

Rodan & Fields

Date

7-1-18

Full name of contributor

Michelle Cohen

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$25.00

Contributor address;

City; State; Zip Code

148 Quinton Cove, Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Systems Analyst

Employer (See Instructions)

Texas Comptroller

Date

7-5-18

Full name of contributor

Rosemary & Jim Nelson

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$10.00

Contributor address;

City; State; Zip Code

130 B Utterback, Kyle, TX 78640

Principal occupation / Job title (See Instructions)

publishing

Employer (See Instructions)

Self

Date

7-6-18

Full name of contributor

Heiko Stang

☐ out-of-state PAC (ID#:

Amount of contribution (\$)

\$6.00

Contributor address;

City; State; Zip Code

380 Turkey Hollow, Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

not employed

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.

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

25.125

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 7-1-18	5 Full name of contributor Valarie Guzman <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; 324 Pauls DR., San Marcos, TX 78666 City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) American Campus Communities
Date 7-1-18	Full name of contributor Tanya Miracle <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 714 Hamilton Court, Brownsville, TX 78526 City; State; Zip Code	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Court Coordinator		Employer (See Instructions) Cameron County
Date 7-1-18	Full name of contributor Donna Haschke <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 308 Fox Hollow, Buda, TX 78610 City; State; Zip Code	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 7-1-18	Full name of contributor Cat Kuracka <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 317 Quarry St., San Marcos, TX 78666 City; State; Zip Code	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# 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 **Ruben Becerra** 3 Filer ID (Ethics Commission Filers)

4 Date **6-1-18** 5 Payee name **Predictive Productions**

6 Amount (\$) **\$2,100.00** 7 Payee address; City; State; Zip Code  
**216 S Wilson  
San Marcos, TX 78666**

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **advertising expenses** (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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:
2 FILER NAME <b>Ruben Becerra</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <b>7-15-18</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Monica L. Becerra</b>	9 Loan Amount (\$) <b>7,518.58</b>
6 Is lender a financial institution? <b>Y (N)</b>	8 Lender address; City; State; Zip Code <b>208 E Mimosa Cir. San Marcos, TX 78666</b>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) <b>O&amp;P Fitter</b>		13 Employer (See Instructions) <b>SMS</b>
14 Description of Collateral <input type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? <b>Y N</b>	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

**SCHEDULE A2**Revised 9/8/2015



# 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 <b>Ruben Becerra</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>6-1-18</b>	5 Payee name <b>Predictive Productions</b>	
6 Amount (\$) <b>\$2,100.00</b>	7 Payee address; City; State; Zip Code <b>216 S Wilson San Marcos, TX 78666</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>advertising expenses</b>	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:
2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 7-15-18	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Monica L. Becerra	9 Loan Amount (\$) 7,518.58
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 208 E Mimosa Cir. San Marcos, TX 78666	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) O&P Fitter		13 Employer (See Instructions) SMS
14 Description of Collateral <input type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)

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

## SCHEDULE A2

Revised 9/8/2015



# 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.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
10 of 10	Ruben Becerra	
<b>4</b> Date	<b>5</b> Payee name	
7-18-18	Lowes	
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code	
124.49 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	2211 #H35 San Marcos, TX 78666	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Others	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held
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: <b>9 of 10</b>		2 FILER NAME <b>Ruben Becerra</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>6-1-18</b>		5 Payee name <b>Color Mix</b>			
6 Amount (\$) <b>81.19</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <b>404 CM Allen San Marcos, TX 78666</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <b>printing expense</b>		(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		Office sought Office held	

Date <b>7-3-18</b>		Payee name <b>Sign Arts</b>			
Amount (\$) <b>455.80</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>205 Cheatham St. San Marcos, TX 78666</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>printing expense</b>		(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		Office sought Office held	

Date <b>7-18-18</b>		Payee name <b>Lowes</b>			
Amount (\$) <b>88.97</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>2211 IH35 San Marcos, TX 78666</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Other</b>		(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		Office sought Office held	

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# 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: <b>8 of 10</b>	2 FILER NAME <b>Ruben Becerra</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>5-18-18</b>	5 Payee name <b>Lowes</b>	
6 Amount (\$) <b>59.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>2211 IH35 San Marcos, TX 78666</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Other</b>	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>6-2-18</b>	Payee name <b>Wal-Mart</b>	
Amount (\$) <b>\$103.86</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>1015 TX80 San Marcos, TX</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food &amp; Bev. Exp.</b>	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>6-2-18</b>	Payee name <b>Pakmail</b>	
Amount (\$) <b>60.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>102 Wonder World Dr. #304 San Marcos, TX</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>printing expense</b>	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# 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: 7 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 4-11-18		5 Payee name Hoot suite			
6 Amount (\$) 243.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code online			
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		Office sought Office held	
Date 4-7-18		Payee name Sam's Club			
Amount (\$) 233.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1350 Leah Ave. San Marcos, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Bey. Expense		(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		Office sought Office held	
Date 4-7-18		Payee name Sam's Club			
Amount (\$) 435.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1350 Leah Ave. San Marcos, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) office supplies		(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		Office sought Office held	

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# 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: 6 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 6-6-18		5 Payee name Hobby Lobby			
6 Amount (\$) 64.68 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 933 Hwy 80 San Marcos, TX 78666			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Other		(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		Office sought Office held	
Date 6-3-18		Payee name Google SVCS APP			
Amount (\$) 16.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code Online			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		(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		Office sought Office held	
Date 5-27-18		Payee name Print Runner			
Amount (\$) 212.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code Online			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) printing expenses		(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		Office sought Office held	

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# 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: 5 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 4-28-18		5 Payee name Lowes			
6 Amount (\$) 130.43 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 2211 IH35 San Marcos, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Other		(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		Office sought Office held	
Date 5-7-18		Payee name Lowes			
Amount (\$) 14.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2211 IH35 San Marcos, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other		(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		Office sought Office held	
Date 5-15-18		Payee name Lowes			
Amount (\$) 10.57 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2211 IH35 San Marcos, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other		(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		Office sought Office held	

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# 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: <b>4 of 10</b>		2 FILER NAME <b>Ruben Becerra</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>4-2-18</b>		5 Payee name <b>Face Book</b>			
6 Amount (\$) <b>417.57</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <b>1601 Willow Road Menlo Park C</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>5-1-18</b>		Payee name <b>Face Book</b>			
Amount (\$) <b>208.59</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>1601 Willow Road Menlo Park C</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>5-1-18</b>		Payee name <b>Face Book</b>			
Amount (\$) <b>70.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>1601 Willow Road Menlo Park C</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# 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: 3 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 3-1-18		5 Payee name Facebook			
6 Amount (\$) \$ 6.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park C			
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		Office sought Office held	
Date 3-1-18		Payee name Facebook			
Amount (\$) \$ 282.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1601 Willow Road Menlo Park C			
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		Office sought Office held	
Date 3-10-18		Payee name A. Browning			
Amount (\$) 70.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 102 Norcrest San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contract labor		(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		Office sought Office held	

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# 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 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 6-16-18		5 Payee name Predictive Productions			
6 Amount (\$) 1,845.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 216 S Wilson San Marcos, TX <del>78111</del> 78666			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising expense		(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		Office sought Office held	
Date 4-12-18		Payee name Predictive Productions			
Amount (\$) 1,290.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 216 S Wilson San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) advertising expense		(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		Office sought Office held	
Date 3-2-18		Payee name McCoy's			
Amount (\$) \$24.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 110 Wonder World Dr. San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other		(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		Office sought Office held	
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: 1 of 10		2 FILER NAME Ruben Becerra		3 Filer ID (Ethics Commission Filers)	
4 Date 7-4-18		5 Payee name Sam's Club			
6 Amount (\$) 335.53 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 1350 Lean Ave San Marcos, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) event expense		(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		Office sought Office held	
Date 7-1-18		Payee name Google SVCS APPS			
Amount (\$) 21.08 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code Online			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) advertising expense		(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		Office sought Office held	
Date 6-26-18		Payee name Fort Worth Hilton			
Amount (\$) 511.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 815 Main St., Ft. Worth, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Travel out of district State convention		(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		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED