

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Ruben

NICKNAME

LAST

SUFFIX

Becerra

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Change of Address

208 E Mimosa Cir., San Marcos TX 78666

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 787-4902

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Leslie

NICKNAME

LAST

SUFFIX

Les

Carnes

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

351 Limestone Lane

Driftwood, TX 78619

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 923-2964

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign
treasurer appointment
(Officeholder Only)

July 15

8th day before election

Exceeded Modified
Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

2 / 20 / 2022

THROUGH

Month

Day

Year

6 / 30 / 2022

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 8 / 2022

Primary

Runoff

Other
Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Hays County Judge

13 OFFICE SOUGHT (if known)

Hays County Judge

14 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

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

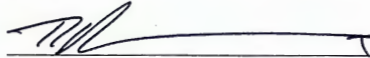
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 3.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,990.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 9,162.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 47,895.38

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:



Sworn to and subscribed before me by Ruben Becerra this 15th day of July

20 22 in which, witness my hand and seal of office.

Signature of officer administering oath _____ Printed name of officer administering oath Anita A Collins Title of officer administering oath Notary

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____

(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,790.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,500.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 5,898.49
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Ruben Becerra</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6-11-22</i>	5 Full name of contributor <i>Jimmy Alan Hall</i> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>\$50.00</i>
6 Contributor address; City; State; Zip Code <i>401 Green Acres Dr., Wimberley, TX 78676</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>
Date <i>6-10-22</i>	Full name of contributor <i>Kelly Higgins</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>395 Rocky Springs, Wimberley, TX 78676</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>
Date <i>6-11-22</i>	Full name of contributor <i>Elaine Cardenas</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>501 Carney Ln., Wimberley, TX 78676</i>		
Principal occupation / Job title (See Instructions) Attorney <i>Hays County Clerk</i>		Employer (See Instructions) <i>Self Hays County</i>
Date <i>6-12-22</i>	Full name of contributor <i>Elaine Brown</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>13900 Sawyer Ranch Rd., Dripping Springs, TX 78620</i>		
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Ruben Becerra</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4-28-22</i>	5 Full name of contributor <i>Debra Morris</i> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>\$250.00</i>
	6 Contributor address; City; State; Zip Code <i>111 Deer Lake Rd, Wimberley, TX 78676</i>	
8 Principal occupation / Job title (See Instructions) <i>retired</i>		9 Employer (See Instructions)
Date 4-10-22 <i>3-2-22</i>	Full name of contributor <i>Ivan Friedman</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$100.00</i>
	Contributor address; City; State; Zip Code <i>2276 Ridge Crest, San Marcos, TX 78666</i>	
Principal occupation / Job title (See Instructions) <i>attorney</i>		Employer (See Instructions) <i>Self</i>
Date <i>3-11-22</i>	Full name of contributor <i>Francisco Fuentes</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$1,000.00</i>
	Contributor address; City; State; Zip Code <i>6502 Alazan Cv., Austin, TX 78730</i>	
Principal occupation / Job title (See Instructions) <i>builder</i>		Employer (See Instructions) <i>Self</i>
Date <i>2-23-22</i>	Full name of contributor <i>Edwina Baethge</i> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$100.00</i>
	Contributor address; City; State; Zip Code <i>1310 Belmont Dr., San Marcos, TX 78666</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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

10-14-22
3-14-22
4-16-22
5-14-22

5 Full name of contributor

Les Carnes

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

351 Limestone Lane, Driftwood, TX 78619

7 Amount of contribution (\$)

125.00 }
125.00 } \$ 500.00
125.00 }
125.00 }

8 Principal occupation / Job title (See Instructions)

Investigator

9 Employer (See Instructions)

Travis Co. Constable 4

Date

3-14-22
4-16-22
5-16-22
6-16-22

Full name of contributor

Heiko Stang

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

380 Turkey Hollow, Wimberley, TX 78676

Amount of contribution (\$)

10.00 }
10.00 } \$ 40.00
10.00 }
10.00 }

Principal occupation / Job title (See Instructions)

Not employed

Employer (See Instructions)

Date

3-14-22
4-16-22
5-16-22
6-16-22

Full name of contributor

Tara Racine

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

291 Brunson Lane, Wimberley, TX 78676

Amount of contribution (\$)

60.00 }
50.00 } \$ 200.00
50.00 }
50.00 }

Principal occupation / Job title (See Instructions)

Not employed

Employer (See Instructions)

Date

4-9-22
5-9-22
6-9-22
3-9-22

Full name of contributor

Cora C. Mendez

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

26411 Dancing Bear, San Antonio, TX 78260

Amount of contribution (\$)

50.00 }
50.00 } \$ 200.00
50.00 }
50.00 }

Principal occupation / Job title (See Instructions)

Retired

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

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

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

3-8-22
4-8-22
5-8-22
6-8-22

5 Full name of contributor

Raoul Belleau

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

50.00
50.00 } 200.00
50.00
50.00

6 Contributor address;

City;

State;

Zip Code

291 Brunson Ln., Wimberley, TX 78676

8 Principal occupation / Job title (See Instructions)

Electrical Engineer

9 Employer (See Instructions)

Teradyne Inc.

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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 F1:	2 FILER NAME Rubén Becerra	3 Filer ID (Ethics Commission Filers)
4 Date 3-24-22	5 Payee name Rubén Becerra	
6 Amount (\$) \$ 4,500.00	7 Payee address; City; State; Zip Code 208 E. Mimosa Cir., San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Reimbursement	
	(b) Description	
	(c) 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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

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 | Gifts/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:	2 FILER NAME <i>Ruben Belerra</i>	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name <i>SEE ATTACHED</i>	
6 Amount (\$) <small>Reimbursement from political contributions intended</small>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <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	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Schedule G	Political Expenditures Made From Personal Funds						
Filer Name:	Ruben Becerra			Reimbursement		Check If	
			From Political		Check If	Austin TX	
			Contributions	Purpose Of Expenditure		Travel Outside	Officeholder
Date	Payee Name	Amount	Intended	Expenditure	Description		
6/26/2022	Blue Dahlia	\$ 52.83	Yes	Food / Bev			
6/24/2022	Herbert's	\$ 73.01	Yes	Food / Bev			
6/10/2022	Lowe's	\$ 193.55	Yes	Polling Expense	Supplies		
4/14/2022	Casa Maria	\$ 78.45	Yes	Food / Bev			
3/23/2022	DS Chamber	\$ 50.00	Yes	Fees			
3/4/2022	Buda Chamber	\$ 150.00	Yes	Fees			
3/4/2022	DS Chamber	\$ 293.27	Yes	Fees			
3/4/2022	Kyle Chamber	\$ 88.00	Yes	Fees			
3/4/2022	Kyle Chamber	\$ 210.00	Yes	Fees			
2/27/2022	Adobe	\$ 57.36	Yes	Fees			
3/27/2022	Adobe	\$ 57.36	Yes	Fees			
4/27/2022	Adobe	\$ 57.36	Yes	Fees			
5/27/2022	Adobe	\$ 57.36	Yes	Fees			
6/27/2022	Adobe	\$ 57.36	Yes	Fees			
3/4/2022	Google Suite	\$ 51.17	Yes	Fees			
4/4/2022	Google Suite	\$ 51.17	Yes	Fees			
5/4/2022	Google Suite	\$ 51.17	Yes	Fees			
6/4/2022	Google Suite	\$ 51.17	Yes	Fees			
6/22/2022	Casa Maria	\$ 73.68	Yes	Food / Bev			
2/24/2022	Casa Maria	\$ 81.12	Yes	Food / Bev			
3/11/2022	Sam's	\$ 570.67	Yes	Food / Bev	Campaign Party		
3/31/2022	Casa Maria	\$ 73.93	Yes	Food / Bev			
4/14/2022	JAH	\$ 3,318.50	Yes	Legal Fees	Legal Fees		
3/11/2022	Kyle 4H	\$ 100.00	Yes	Contribution			
		\$ 5,898.49					