CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

P.O. Box 12070

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MR ED NICKNAME LAST	MI 	OFFICE USE ONLY Date Received 07-16-12P04:24 RCVD
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of address	ADDRESS / POBOX; APT / SUITE #: CITY; P. O. BOX 100597 San Antoniu, Tx 1	STATE; ZIPCODE	Date Hand-delivered or Postmarked Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (210) 355-8565	EXTENSION	Date Processed
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST GLACIT NICKNAME LAST	MI SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE#, 3715 E. SUNSHINE SAT	E RANCH 78228	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (210) 834 - 4960	EXTENSION	•
9 REPORT TYPE	January 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH	6 Marith Day (130)	Year
11 ELECTION	Month Day Year ELECTION TYPE Primary	Runoff	General Special
12 OFFICE	SAISD #7	13 OFFICE SOUGHT (if known)	•
	GO TO PAG	GE2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET BG 2

	···		OOVER SHEET PG Z
14 C/OH NAME	O GAR	ZA CAMPAIGN 15	ACCOUNT # (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		
	COMMITTEE TYPE	COMMITTEE NAME	TOTAL OF SOCH EXPENDITURES.
	GENERAL	NA	
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		The state of the s	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION	1 70		
TOTALS	1. TOTAL F PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
· · · · · · · · · · · · · · · · · · ·	2. TOTAL (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 622,00
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	ED \$
	4. TOTAL POLITICAL EXPENDITURES \$2 104.88		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$		
OUTSTANDING LOAN TOTALS	6. TOTAL P LAST DA	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ 5 123.97
18 AFFIDAVIT			
NOT S	I VAZQUEZ GONZALEZ ARY PUBLIC tate of Texas . Exp. 01/26/2013	! swear, or affirm, under penalty of per is true and correct and includes all informe under Title 15, Election Code. Signature of Candida	ormation required to be reported by
AFEIX NOTARY STARRE) (C	organical of Sundiag	ne or Onicerolder
Sworn to and subs		, 20 12 , to certify which, witness my	
Signature of officer admir	stering oath	Printed name of officer administering oath	C. Dir - Gov tal Relations Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

··	e Instruction Guide explains how to complete th	is form.	1 Total pages Sch	nedule A: í
2 FILER NAME	ED GARZA		3 ACCOUNT # (E	Ethics Commission Filers)
4 Date 1-27-12 9 Principal occu	5 Full name of contributor out-of-state PAC (ID#_ Craham Weston 6 Contributor address; City; State; Zip Code 5000 Walzem Rel SAT 7801 3		7 Amount of contribution (\$) (22, 20) (If travel outside Instructions)	8 In-kind contribution description (if applicable) Private air plang roundfris to Lubbook Byron Center 15D of Texas, complete Schedule T)
Date	Cultura			
	Full name of contributor out-of-state PAC(ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occu	pation / Job title (See Instructions)	Employer (See	(If travel outside o	f Texas, complete Schedule T)
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occuj	pation / Job title (See Instructions)	Employer (See	(if travel outside o	f Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID# Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occup	pation / Job title (See Instructions)	Employer (See I	(If travel outside of nstructions)	Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID# Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occup	pation / Job title (See Instructions)	Employer (See I	(If travel outside of nstructions)	Texas, complete Schedule T)
lf c	ATTACH ADDITIONAL COPIES Of ontributor is out-of-state PAC, please see instru	F THIS SCHEDULE uction guide foradd	AS NEEDED itional reporting r	equirements.

POLITICAL EXPENDITURES

P.O. Box 12070

SCHEDULE F

	EXPENDITURE CATECORU		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Solicitation/Fur Food/Beverage Expense Travel In Distr Polling Expense Travel Out Of	s/Contract Labor Loa idraising Expense Transict Con District (n Repayment/Reimbursement nsportation Equipment & Related Expense tributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)
	The Instruction Guide explains how		ien (enter a category not listed above)
1 Total pages Schedule F:	2 FILER NAME A	to complete this form.	
	ED GARZA		3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	·	
3-1-17 6 Amount (\$)	Allied Advert	Sizz	
_	7 Payee address; City; State; Zip Code	U -	
356.00	3700 Blanco Rd.	SAT 78	212
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If tra	
OF	Adv toponse	(b) Description (irtra	vel outside of Texas, complete Schedule T)
EXPENDITURE	School Banner	- S. L. al	homes Till
9 Complete ONLY if direct	Candidate / Officeholder name		Bunner TJHS
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P.O. Box 12070

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense de explains how to complete this f	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME ED 64024	}-	3 ACCOUNT # (Ethics Commission Filers)
4 Date	A MS		
Reimbursement from political contributions intended	7 Payee address; City: S	state: Zip Code deucles by Rd SAT 78201	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the t	a 7	n (If travel outside of Texas, complete Schedule T)
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Amount (\$) 20 Perimbursement from political contributions intended	Payee address; City; s 4514 Fudeico SAF	State; Zip Code Skby RQ 1820 (
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P.O. Box 12070

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P.O. Box 12070

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P.O. Box 12070

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			