JAVIER REYNA

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	iuide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	Tolal pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	ms/mrs/mr first Javier	MI ·	OFFICE USE ONLY Date Recognition FROM COUNTY
	NICKNAME LAST REYNA	SUFFIX	DEPARTMENT OF ELECTIONS & VOTER REGISTRATION
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 637 Rey Salomon &	gity; zip code rownsville, TX 18521	FEB 0 5 2018
Change of Address			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (956) 203-7549	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	МІ	Receipt # Amount \$
NAME	NICKNAME LAST	. , ,	Date Processed
	Torres	Jr.	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S 1304 Esperanza Ln.	Brownsville, TX	78520
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (956) 466-9949	EXTENSION	
9 REPORT TYPE	July 15 30th day before ele		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Altach C/OH - FR)
10 PERIOD COVERED	Month Day Year 0 / 13 / 2018	THROUGH OQ	Day Year / 05 / 2018
11 ELECTION	### ELECTION DATE Month Day Year Primary	ELECTION TYPE Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (il known Justice of Pc+2-2	the Peace
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 O/OH NAME	Javie	r Reyna 1	5 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF 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			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 4,410				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED				
	4. TOTAL POLITICAL EXPENDITURES \$ \$, 359.66 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2.623.69				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2,633.69				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
18 AFFIDAVIT	reconstruction of the second				
Maribel Diaz NOTARY PUBLIC State of Texas My Comm. Exp. 05/19/2020 Notary ID: 13066868-7 Notary ID: 13066868-7					
			slidate or Officeholder		
ĄFFIX NOTARY STAMI	-/SEALABOVE	ov the said Javier Rey Na	~ C th		
Sworn to and subscr	" 1 "	/	, this the		
day of February 20 18, to certify which, witness my hand and seal of office.					
	Maribel Dine Votary Public				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 F	FILERNAME Javier REYNA 20 Filer ID'(Ethics Con	mmission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,410.0
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 800.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8, 359.62
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	\$ 434.13
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	\$
<u> </u>		

MONETARY POLITICAL CONTRIBUTI	ONS SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 3
2 FILER NAME Javier REYNA	· 3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:	1/SPANES > FURNITHISELY
8 Principal occupation / Job title (See Instructions) Eagle Insurance Agency Muner	elf-Employed
Date Full name of contributor Para Loan Company Contributor address; City; State; Zip Co.	Amount of contribution (\$) 120.00
	yer (See Instructions) If Employed
Date Full name of contributor out-of-state PAC (ID#: 1-19-18 Juan Martinez Contributor address; City; State; Zip Coc 554 E. Jackson Brownsvill,	Amount of contribution (\$) Amount of contribution (\$) A 0.00 Ext (See Instructions)
Principal accupation / Johnstein / Construction	yer (See Instructions)
Full name of contributor Guli baldo + Maria Garza Contributor address; City; State; Zip Code 7301 W. Lakeside Olmito, TX 78	
Principal occupation / Job title (See Instructions) Employ Employ	ver (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCH If contributor is out-of-state PAC, please see instruction guide	IEDULE AS NEEDED e for additional reporting requirements.

MONE	TARY POLITICAL	CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to	o complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Jarier Rayno	i	3 Filer ID (Ethics Commission Filers)
4 Date /-/9-18	Various donor 6 Contributor address;	out-of-state PAC (ID#:	7 Amount of contribution (\$) 1,400.00 Spanky's fund-raiser
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instru	
Date G 8	Rey Cisneros Contributor address; 950 E. Van Buren	City; State; Zip Code Brownsville, TX 78520	Amount of contribution (\$) $200.^{00}$
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	
/-19-18	Kuben Herrera Contributor address;	City; State; Zip Code	Amount of contribution (\$)
, ,	ation / Job title (See Instructions) ++v (ney	Employer (See Instruc	· · · - /
Date -19-18	Antonio Murai	Tout-of-state PAC (ID#:	Amount of contribution (\$)
Principal occupa	ation / Job title (See Instructions) 140-plex + Collision for	Employer (See Instruction Self-EA	· · · · · · · · · · · · · · · · · · ·
;			
	ATTACH ADDITIONA If contributor is out-of-state PAC, pl	AL COPIES OF THIS SCHEDULE AS NE ease see instruction guide for additional	EDED reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Javier Reyna	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
1-24-18	Jerry Rojas 6 Contributor address; City; State; Zip Code 513 S. Commerce Hurlimen, TX 785	300.00
8 Principal occu	pation / Job title (See Instructions) Aur ant owner Salar de Golfo Self.	e Instructions) - Employed
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
1-24-18	Contributor address; City; State; Zip Code	500.00
	300 U.S. 281 Brownsville, TX 78520	
	ation / Job title (See Instructions) Employer (See	
LAMbari	rifice Shop LLC Self-	employed
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City; State; Zip Code Bouns nilb, TX 78	200.°°
	ation / Job title (See Instructions) 7-Plex + allission facts Employer (See Self-	e Instructions) Employed
Date	Full name of contributor	Amount of contribution (\$)
2-2-18	Arturo Martinez	35000
	2500 N. Expressing Browns wite, TX 7 P.	530
Principal occupa	ation / Job title (See Instructions) Employer (See Set 1-	Pinstructions) P-Employed
,		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

CONTRIBOTIONS			
The Instruction Guide explains how to complete this form	n. 1 Total pages Schedule A2;		
2 FILER NAME Javier REYNA	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS \$ 800.00		
5 Date 6 Full name of contributor out-of-state PAC (ID#: 1-25-18 Rodrigo Almanza 7 Contributor address; City; State; Zip Cod 7376 Bur Oak Brownsill, R	Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON-JUDICIAL) (See Instructions)		
Lawenforcement - Investigator	Cameron County 13 Contributor's job title (FOR JUBICIAL) (See Instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributors job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution \$ description description for Campaign de Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)		
Law-enforcement / Investigator	Cameron County		
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<i>t</i>			
•			
ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDED		

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Travel In District Office Overhead/Rental Expense Food/Beverage Expense Polling Expense 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. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 5 Payee name U.S. Post office 7 Payee address; City; State; Zip Code 79.55 Olmito, X 78575 (b) Description 8 Check if travel outside of Texas. Complete Schedule T. Advertising Expense PURPOSE Check if Austin, TX, officeholder fiving expense EXPENDITURE Office sought Office held Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH J. A. Sports 1-22-18 Payee address; City; State; Zip Code 4627 Central Cir Browns ville, TX 78521 Amount (\$) Category (See Categories listed at the top of this schedule) Description Advertising Expense Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH 1-24-18 Brownsville, Herald Amount (\$) Payee address; City; State; Zip Code 3.145.10 1135 E. VanBuren Brownsville, TX 78520 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. PURPOSE Advertising Expense OF Check if Austin, TX, officeholder living expense EXPENDITURE Office sought Justice of The Peace 2-2 Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH KeyNa davier ' ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Revised 9/8/2015

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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 (only a category pot listed above)

Candidate/Officeholder/Politica Credit Card Payment	•	ins how to complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1:	Lavier	REYNA	3 Filer ID (Ethics Commission Filers)
4 Date 1-26-18	5 Payee name, Haidy Graph 7 Payee address; City; State; 2209 El Dorado Are, Brow	rics Design	
6 Amount (\$) 108.00	7 Payee address; City; State; 2209 El Dorado Ave. Brow	MSv: 16, TX 785	270
8	(a) Category (See Categories listed at the top of this		A Town Consider Coholida T
PURPOSE OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T. in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
1-27-18	Juanita's K	gestauran+	
Amount (\$) 00 140. —	Payee address; City; State; 3155 International	Brownsville, 7	V 78520
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Food Expense	Check if travel or	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Block Walking Group Candidate / Officeholder name	Office sought	Office held
1-30-18	Haidy Graphi	ic Designs	
433. °	Payee address; City; State; 2209 El Dora do K	Zip Code Pancho Viejo, TX 7	8575
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this Advertisement Expense	Check if travel o	outside of Texas. Complete Schedule T. in, 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 F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

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 (expenses property and lighted above)

Candidate/Officeholder/Politic	T	Legal Services		:/Wages/Contract Labor	Other (enter a catego	
Credit Card Payment		The Instruction Gui	de explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NA		er Re		3 Filer ID (Ethics	s Commission Filers)
4 Date /-30-18	5 Payee nan	"U.S.P	ost o	4 fice		
250.00	7 Payee add	lress; City; J. Expressionary -	State; Zip Code 17 0/Min	to,7x 1857	75	
8	(a) Category	See Categories listed at the	e top of this schedule)	(b) Description		
PURPOSE	ALVER	tising EXA	ense	Check if travel	l outside of Texas. Complete S	chedule T.
OF EXPENDITURE	1			Check if Aus	stin, TX, officeholder living	expense
EXPENDITIONE	[Stam	rs)				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		te / Officeholder nam	е	Office sought		Office held
Date	Payee nan					
2-1-18	1 1/1	etro L	eader			
911,00	Payee add	ress; City; V. Alberta K	State: Zip Code Id Edinbu	15,TX 785	39	
	Category	See Categories listed at the	top of this schedule)	Description ·		
PURPOSE	01	12	+		outside of Texas. Complete Sc	chedule T.
OF	Have	HSemen	•	Check if Aust	lin, TX, officeholder living	expense
EXPENDITURE	E	tisemen XPENSE				
Complete ONLY if direct expenditure to benefit C/O		e / Officeholder nam	е	Office sought		Office held
Date	Payee nar					
2-3-18	m	int Bar	t Grill			
Amount (\$)	Payee add		State; Zip Code	ul er	レータにしゅ	
210.49	600 ST	ring Mart B	lud Bro	wnsville, T	V (8790	
1	Category	See Categories listed at the	top of this schedule)	Description		
PURPOSE		1 r saise		Check if travel	outside of Texas. Complete So	chedule T.
OF EXPENDITURE	1-000	Expens	E	Check if Ausl	tin, TX, officeholder living	expense
	Block-	walking Gre	up)			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e / Officeholder nan	ne ´	Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Javier REYN	3 Filer ID (Ethics Commission Filers)		
4 Date 2-5-18	² FILER NAME Javier REYN ⁵ Payee name Discover Carc			
6 Amount (\$) 434.13	7 Payee address; City: State; Zip Code Salt Lake City	, UT 84130-0395		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) 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/OF	Candidate / Officeholder name Javier REY Na Ju	Office sought Office held Stice of The Place 2-2		
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 Taxas. 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

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Office Overhead/Rental Expense Fees Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel Out Of District Printing Expense Contributions/Donations Made By Other (enter a category not listed above) Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) Total pages Schedule G: 2 FILER NAME 4 Date 5 Payee name W. Alton Gloor Brownsville, TX 78520 City; State; Zip Code 7 Payee address; Reimbursement from political contributions intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Advertisement Check if travel outside of Texas, Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense Office held Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Office Depot Payee address; City; State; Zip Code 515 E. Morrison Sf. Bownsville, TX 78520 political contributions intended Category (See Categories listed at the top of this schedule) Activer 453 mg Expense (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, afficeholder living expense **EXPENDITURE** Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Sam's CluB Payee address; City; State; Zip Code 3750 W. Alton Gloor Browns ville, 78520 Amount (\$ political contributions intended Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Advertising Ex Pense Check if travel outside of Texas. Complete Schedule T. OF __ Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Event Expense Advertising Expense Office Overhead/Rental Expense Fees Accounting/Banking Consulting Expense Travel In District Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel Out Of District Contributions/Donations Made By Other (enter a category not listed above) Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME Javier REYNA 5 Payee name What-A-Burger 7 Payee address; City; State; Zip Code 2103 Ruben Torres Blvd. Brownsville, TX 78520 3 Filer ID (Ethics Commission Filers) 1. Total pages Schedule G: Reimbursement from political contributions . intended (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Check if travel outside of Texas, Complete Schedule T. Fond Expense OF Check if Austin, TX, officeholder living expense EXPENDITURE Food For Block-walkers Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Exxon Expless City; State; Zip Code Payee address; Brownsville, TX Amount (\$) 865 N. Expressivay political contributions intended Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Transportation (Fuel) ☐ Check if travel outside of Texas. Complete Schedule T. OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held Office sought Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Payee address; City; State; Zip Code 2300 N. Expression Browns will TX 78520 political contributions intended Category (See Categories listed at the top of this schedule) PURPOSE Transportation Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / OfficeHolder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED