CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/	MS MRS MR FIRST	МІ	OFFICE USE ONLY
OFFICEHOLDER NAME	Lucy		Date Received
	NICKNAME LAST	SUFFIX	SOCIAL SALES AND
	Aub:0		AT 10:16AM
4 CANDIDATE /		CITY; STATE; ZIP CODE	JAN 14 RECD
OFFICEHOLDER MAILING	MIS CitAtiON D	rise	1
ADDRESS	Corpus Christ:, T	ELAS DOUL	CLERK POUNTY COURT, NASSE COUNTY, TEXAS
Change of Address	Corpus Chairi,	18411	BY DEPUTY
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	
OFFICEHOLDER PHONE	(361) 774-0465	•	Date Hand-delivered or Date Postmarked
6 CAMPAIGN	MS / MRS MR FIRST	мі	Receipt # Amount \$
TREASURER NAME	NICKNAME LAST		Date Processed
	Lund quis	+	Date Imaged
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / St	JITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	700 Fuerhart 7	RA. Suite 11	
(Residence or Business)			
	corpus Christi,	TEXAS 7841	4
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER PHONE	(361) 834.444	8	
THORE			
			1
9 REPORT TYPE	January 15 30th day before el	lection Runoff	15th day after campaign
		_	treasurer appointment (Officeholder Only)
	July 15 Sth day before elec	ction Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month Day Year	Month	Day Year
COVERED	07/01/2019	TUDOUGU 12 /	31 /2019
	017 017 2019	THROUGH 12	21 / 51019
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary	Runoff Other	
	General General	Description	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Justice of The Peac	The same of the sa	
	Pet. 1, Place 3		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15 Fil	er 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		
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
	œ	COMMITTEE CAMPAIGN TREASURER ADDRESS	
TOTALS 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED		\$ 2	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2
EXPENDITURE TOTALS	3 TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS		\$ &
			\$ 934.23
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$ 2,883.47
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE DAY OF THE REPORTING PERIOD \$	
18 AFFIDAVIT			
		I swear, or affirm, under penalty of perjury true and correct and includes all informati under Title 15, Election Code.	
		Signature of Candidate	or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, b	by the said Lucy Rubio	_, this the <u>13</u>
day of Janu	4 10	to certify which, witness my hand and seal of office.	
Notary	E GUTIERREZ ID #131959031 mission Expires Idhān@@@ding oath	Mary E. Gytierrez C	ourt Cleuk itle of officer administering oath
of officers	Complete Unity Call	. Third fame of officer administering oath	nic of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	19 FILER NAME 20 Filer ID (Ethics Cor		mmission Filers)
	Lucy Rubio		э н
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	3	\$
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$ 934.23
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 FU	NDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	TIONS RETURNED	\$

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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 c	omplete this form.	Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Lucy Rubio		3 Filer ID (Ethics Commission File	rs)
4 Date	E Pavee name			
8/12/2019	DNH Domain Hostin 7 Payee address;	, Service		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
	14455 N. HAyden Pd. St	e. 224		
15.17	Scottsdale, AZ. 8x2			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	(other) Web Domain			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	-
Date	Payee name			
11-8-2019	COASTAL BOND Wellnes	٤.		
Amount (\$)	Payee address;	City;	State; Zip Code	
80.00	2882 Holly Road			
80.00	corpus Christi, Texas	18412		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	PINK DIVA BAIL TICKETS			
OF EXPENDITURE	(other)			
		Chack if Austin	TV officeholder living evenens	
	Check if travel outside of Texas. Complete Schedule T.		n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Justin of the A	ence
	Lucy Rubio		Pet. 1. Place	
Date	Payee name			
11/12/2019	JASON Del:			
Amount (\$)	Payee address;	City;	State; Zip Code	
	Saas Saantosa Blo	e. 17 m; 44 a	.00	
94.82		18413		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE		•		
OF EXPENDITURE	3009			
EX ENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OH	Luan Rubio		Justice of The P	LAFE
			Pot. 1, Place 3	
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEE	DED	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Onations 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 c	omplete this form.	-	**************************************
1 Total pages Schedule F1:	2 FILER NAME Lucy Rubis		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name	7	١. ١	
6 Amount (\$)	7 Payee address; 2882 Holly Rund	City;	State;	Zip Code
250.00	Corpus Christi, Texas	18412		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Down to by Breast Career Day of Diving Rule Diving	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Justin Pet. 1	Office held OF The Acade Diagram
Date	Payee name			
11/13/2019	Constal Bend Wellnes	s Founds	re:+*	
Amount (\$)	Payee address;	City;	State;	Zip Code
200.00	2882 Holl & Rond			
20011	Category (See Categories listed at the top of this schedule)	7841S Description		
PURPOSE	Dou Ation > Pink Wreath	Description		
OF EXPENDITURE	Pink Diva BAIL			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living of	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	7 . 1	office held The Pene
expenditure to benefit C/OH	Lucy Rub: 0		Det.	.1, Place 3
Date	Payee name			
Dec. 9, 7019	Texas Blame Restau	+ HAM		
Amount (\$)	Payee address;	City;	State;	Zip Code
	4535 S. PADIR ISLAND	Drive, Sui	te 33	
128.03	Corpus Christi, Texa	1 78411		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	(5006)	(%)		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living e	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Lucy Rubio		3usti	1, PLACE 3
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	DED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Transportation Equipment & Related Expense Travel In District Travel Out Of District

Solicitation/Fundraising Expense

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 3 Filer ID (Ethics Commission Filers) Lucy Rubio 5 Payee name Swoozie's 12/14/2019 7 Payee address; 6 Amount (\$) City; State; Zip Code 8417 Preston Center PLAZA 128.11 DALLAS, TEXAS 75225 (a) Category (See Categories listed at the top of this schedule) (b) Description (Event Expense) Supplies Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense for Christmas Apprection EXPENDITURE Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Lucy Rubis Payee name Date 12/30/2019 Amount (\$) Pavee address: City; State; Zip Code 4101 US Hishway 77, Suite K2 38.10 Corpus Chr:st: Trxx 78410
Category (See Categories listed at the top of this schedule)

Descrip Description Check if travel outside of Texas. Complete Schedule T. (Fuent Expense) PURPOSE Moody Soth Reunion Committee Dance " New year's Eve" OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Complete ONLY if direct Justice of the Peac expenditure to benefit C/OH Payee name Date Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED