## CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

P.O. Box 12070

## FORM C/OH COVER SHEET PG 1

(512) 463-5800

The C/OH Instruction Guide explains	how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / MS/MRS/MR OFFICEHOLDER	FIRST	MI	OFFICE USE ONLY
NAME TOE			Date Received FOR RECORD
NICKNAME	LAST	SUFFIX	947AT AM
BEI	VAVIORS		FEB 1 3 2015
4 CANDIDATE / ADDRESS / PO BO	WORK WESTERN THE CONTROL OF THE CONT	STATE; ZIP CODE	MEARIASSANDS
MAILING 410	ATLANTIC ST		Date Hand-delivered or Rostmarked
ADDRESS    change of address   Color	PUS CHRISTI,	Tx 78404	, peroxy:
5 CANDIDATE/ AREA CODE	PHONE NUMBER	EXTENSION	Receipt # Amount
OFFICE LOLDED	549-5107	EXICION	Date Processed
6 CAMPAIGN MS/MRS MR TREASURER	FIRST	MI	Date Imaged
NAME	ELFINO	<u> </u>	
NICKNAME	o PALACIO JI	SUFFIX	
FIN	O PALACIO SI	e.	
	S (NO PO BOX PLEASE); APT / SUITE #;	CITY; STATE;	ZIP CODE
ADDRESS 402	PEOPLE ST.,		
Con	APUS CARISTI	/TX 78901	
8 CAMPAIGN AREA CODE	PHONE NUMBER	EXTENSION	
PHONE (761 )	884-8372		
9 REPORT TYPE		Dune#	15th day after campaign
January 18	30th day before election	Runoff	treasurer appointment (officeholder only)
July 15	8th day before election	Exceeded \$500	Final report (Attach C/OH - FR)
33		limit	
10 PERIOD Month Day		Month Day	Year
COVERED 7/1	/14 THROUGH	12/31/	14
		2.00 C (	
11 ELECTION ELECTION Month Day	/ Year	_	-
	Primary	Runoff	General Special
	<i>Y</i>		
12 OFFICE OFFICE HELD (if as	C OF THE PEACE	13 OFFICE SOUGHT (if known)	2520000
217.1	Pe.1		
NUECE	5 COUNTY	¥)	
700000	- 2007		

GO TO PAGE 2

2015-031

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME 15 ACC			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 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			
23	GENERAL SPECIFIC	COMMITTEE ADDRESS			
ਚ	P	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages	Œ	COMMITTEE CAMPAIGN TREASURER NAME	-		
	题	COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL I				
	2. TOTAL (OTHER	\$ -			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$				
	4. TOTAL	\$ 0			
CONTRIBUTION BALANCE	5. TOTAL P	DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL F	* 3215.00			
18 AFFIDAVIT					
LORRAINE L VILLANUEVA My Commission Expires June 3, 2018  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					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said					
Lorraine Villanuera Admin. Secretary					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					