



Official Public Records of
Harris County
Stan Stanart
County Clerk

Campaign Finance Report



Stan Stanart
COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo: 201748
Received By Clerk: 1/17/2017
File Date: 1/17/2017 11:53:00 AM
Office: Constable Pct. 6
Candidate: Trevino, Silvia
Treasurer: Garcia, Carolyn E.
Category: Contributions And Expenditures
Delivered By: Personal Appearance
Type: COR

Harris County No Fee

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		2 Total pages filed: 13	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Silvia	MI		OFFICE USE ONLY Date Received	
	NICKNAME	LAST Trevino	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1406 Godwin St. Houston, TX 77023		ZIP CODE		Date Hand-delivered or Date Postmarked	
					Receipt #	
					Amount	
					Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>CAROLYN</i>	MI <i>E.</i>			
	NICKNAME	LAST <i>GARCIA</i>	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>10202 Aves Street Houston, TX. 77034</i>					
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
		<i>832 - 755 - 1826</i>				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year	
			<i>10/30/2016</i>		<i>12/31/2016</i>	
10 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
			<i>11/08/2016</i>			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)		
	Harris County Constable Precinct 6			Harris County Constable Precinct 6		
<p style="text-align: center;">GO TO PAGE 2</p>						

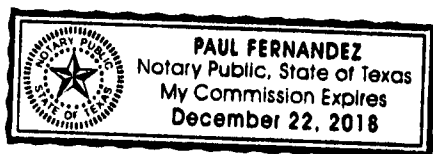
CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 13

13 C / OH NAME Trevino, Silvia		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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	
	<input type="checkbox"/> GENERAL		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,500.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 134.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 6,892.07
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 142.96
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



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.

Silvia L. Trevino
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Silvia Trevino, this the 17th day of January, 2017, to certify which, witness my hand and seal of office.

Paul Fernandez
Signature of officer administering

Paul Fernandez
Printed name of officer administering

Notary Public / Sgt.
Title of officer administering oath

FORM C/OH
COVER SHEET PG 3
 3 of 13

SUBTOTALS - C/OH

18 FILER NAME Trevino, Silvia		19 Filer ID	
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	3,500.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,361.42
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	1,530.65
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/13
2 FILER NAME Trevino, Silvia		3 Filer ID
4 Date 10/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alanis, Joe <hr/> 6 Contributor address; City; State; Zip Code 9319 Filaree Ridge Lane Houston, TX 77009	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Captain		9 Employer (See Instructions) Harris County Constable, Pct. 6
Date 10/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brockman, Rosalie <hr/> Contributor address; City; State; Zip Code 2322 Eaglerock Dr. Houston, TX 77080	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Corner Rock Construction
Date 10/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, Rafael <hr/> Contributor address; City; State; Zip Code 6318 Los Coyotes Dr. Pasadena, TX 77505	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayor, Jesus (Dr.) <hr/> Contributor address; City; State; Zip Code 302 W. Gulf Bank Rd., Ste. A Houston, TX 77037	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Medical Doctor		Employer (See Instructions) Self
Date 11/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamez, Adriana (The Honorable) <hr/> Contributor address; City; State; Zip Code 4436 Jefferson St. Houston, TX 77023	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/13	
2 FILER NAME Trevino, Silvia				3 Filer ID	
4 Date 10/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner Jr., Cecil			7 Amount of Contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code 9118 Western Dr. Houston, TX 77080					
8 Principal occupation / Job title (See Instructions) Corporate Security Consultant			9 Employer (See Instructions) Self		
UNOFFICIAL					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS				SCHEDULE A2	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/13	
2 FILER NAME Trevino, Silvia				3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ 0.00	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)		8 Amount of contribution (\$)		9 In-kind contribution description
	7 Contributor address; City; State; Zip Code				
			<input type="checkbox"/> 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)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's 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)					

PLEDGED CONTRIBUTIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 7/13	
2 FILER NAME Trevino, Silvia				3 Filer ID srtrevino@comcast.net	
4 TOTAL OF UNITEMIZED PLEDGES				\$ 0.00	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)		8 Amount of pledge (\$)		9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		

10 Principal occupation / Job title (See Instructions)			11 Employer (See Instructions)		
UNOFFICIAL COPY					

POLITICAL EXPENDITURES 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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 8/13		2 FILER NAME Trevino, Silvia		3 Filer ID	
4 Date 10/31/2016		5 Payee name Campos, Marc			
6 Amount (\$) \$400.00		7 Payee address; City; State; Zip Code 816 Ralfallen Houston, TX 77008			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/02/2016		Payee name Carroll Printing			
Amount (\$) \$2,029.69		Payee address; City; State; Zip Code 2907 Canal Houston, TX 77003			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/03/2016		Payee name Gathering of Eagles			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 115 Maryanne Dr. Friendswood, TX 77546			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES 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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 9/13		2 FILER NAME Trevino, Silvia		3 Filer ID	
4 Date 11/03/2016		5 Payee name J.C. Graphics			
6 Amount (\$) \$533.67		7 Payee address; City; State; Zip Code 7504 Harrisburg Houston, TX 77012			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Shirts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/03/2016		Payee name Mandola's Deli			
Amount (\$) \$729.00		Payee address; City; State; Zip Code 4105 Leeland Houston, TX 77023			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Day Lunches	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/06/2016		Payee name Sam's Club			
Amount (\$) \$397.31		Payee address; City; State; Zip Code 11101 Fuqua Houston, TX 77089			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Election Day Volunteers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		SCHEDULE F1					
<div style="text-align: center; font-weight: bold; font-size: small;">EXPENDITURE CATEGORIES FOR BOX 8(a)</div> <table style="width: 100%; font-size: x-small;"> <tr> <td style="vertical-align: top; width: 25%;"> Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment </td> <td style="vertical-align: top; width: 25%;"> Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services </td> <td style="vertical-align: top; width: 25%;"> Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor </td> <td style="vertical-align: top; width: 25%;"> Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) </td> </tr> </table> <div style="text-align: center; font-weight: bold; font-size: x-small;">The Instruction Guide explains how to complete this form.</div>				Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment	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)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment	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)				
1 Total pages Schedule F1: Sch: 3/3 Rpt: 10/13	2 FILER NAME Trevino, Silvia		3 Filer ID				
4 Date 10/30/2016	5 Payee name Sam's Club						
6 Amount (\$) \$225.87	7 Payee address; City; State; Zip Code 11101 Fuqua Houston, TX 77089						
8 PURPOSE OF EXPENDITURE	<table style="width: 100%; font-size: x-small;"> <tr> <td style="width: 50%; vertical-align: top;"> (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense </td> <td style="width: 50%; vertical-align: top;"> (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Volunteers </td> </tr> </table>			(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Volunteers		
(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Volunteers						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							
Date 11/03/2016	Payee name Sprint2Print						
Amount (\$) \$811.88	Payee address; City; State; Zip Code 8748 Clay Rd., Ste. 300 Houston, TX 77080						
PURPOSE OF EXPENDITURE	<table style="width: 100%; font-size: x-small;"> <tr> <td style="width: 50%; vertical-align: top;"> (a) Category (See Categories listed at the top of this schedule) Printing Expense </td> <td style="width: 50%; vertical-align: top;"> (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs </td> </tr> </table>			(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs		
(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							
COPY							

UNPAID INCURRED OBLIGATIONS		SCHEDULE F2				
<div style="text-align: center;">EXPENDITURE CATEGORIES FOR BOX 10(a)</div> <table style="width: 100%; font-size: small;"> <tr> <td style="vertical-align: top; width: 33%;"> Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee </td> <td style="vertical-align: top; width: 33%;"> Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services </td> <td style="vertical-align: top; width: 33%;"> Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor </td> <td style="vertical-align: top; width: 33%;"> Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) </td> </tr> </table> <div style="text-align: center; font-size: x-small; margin-top: 5px;">The Instruction Guide explains how to complete this form.</div>			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)
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)			
1 Total pages Schedule F2: Sch: 1/1 Rpt: 11/13	2 FILER NAME Trevino, Silvia	3 Filer ID				
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0.00				
5 Date	6 Payee name					
7 Amount (\$)	8 Payee address; City; State; Zip Code					
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political					
10 PURPOSE OF EXPENDITURE	<table style="width: 100%; border: none;"> <tr> <td style="width: 55%; border: none;"> (a) Category (See Categories listed at the top of this schedule) </td> <td style="width: 45%; border: none;"> (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. </td> </tr> </table>		(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
Candidate/Officeholder name	Office sought	Office held				

EXPENDITURES MADE BY CREDIT CARD		SCHEDULE F4				
<p style="text-align: center;">EXPENDITURE CATEGORIES FOR BOX 10(a)</p> <table style="width: 100%; font-size: small;"> <tr> <td style="vertical-align: top; width: 33%;"> Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee </td> <td style="vertical-align: top; width: 33%;"> Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services </td> <td style="vertical-align: top; width: 33%;"> Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor </td> <td style="vertical-align: top; width: 33%;"> Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District OTHER (enter a category not listed above) </td> </tr> </table> <p style="text-align: center; font-size: small;">The Instruction Guide explains how to complete this form.</p>			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)
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)			
1 Total pages Schedule F4: Sch: 1/1 Rpt: 12/13	2 FILER NAME Trevino, Silvia	3 Filer ID				
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00				
5 Date	6 Payee name					
7 Amount (\$)	8 Payee address; City; State; Zip Code					
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political					
10 PURPOSE OF EXPENDITURE	<table style="width: 100%; border: none;"> <tr> <td style="width: 55%; border: none;"> (a) Category (See Categories listed at the top of this schedule) </td> <td style="width: 45%; border: none;"> (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. </td> </tr> </table>		(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
	Candidate/Officeholder name	Office sought				
		Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS		SCHEDULE G				
<div style="text-align: center;">EXPENDITURE CATEGORIES FOR BOX 8(a)</div> <table style="width: 100%; font-size: small;"> <tr> <td style="vertical-align: top;"> Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment </td> <td style="vertical-align: top;"> Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services </td> <td style="vertical-align: top;"> Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor </td> <td style="vertical-align: top;"> Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) </td> </tr> </table> <div style="text-align: center; font-size: x-small; margin-top: 5px;">The Instruction Guide explains how to complete this form.</div>			Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment	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)
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1 Total pages Schedule G: Sch: 1/1 Rpt: 13/13	2 FILER NAME Trevino, Silvia	3 Filer ID				
4 Date 11/07/2016	5 Payee name Sprint2Print					
6 Amount (\$) \$156.96 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8748 Clay Rd., Ste. 300 Houston, TX 77080					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
Date 11/04/2016	Candidate/Officeholder name Payee name Sprint2Print					
Amount (\$) \$1,373.69 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8748 Clay Rd., Ste. 300 Houston, TX 77080					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
Candidate/Officeholder name Office sought Office held						
RECORDER'S MEMORANDUM: At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.						