CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			
The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST IGNACIU	MI	OFFICE USE ONLY
NAME		44	Date Received
	NICKNAME LAST	SUFFIX	E
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	UT ITT
OFFICEHOLDER MAILING ADDRESS	1800 RAYDON DR		AH 9
Change of Address			. So
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	27
OFFICEHOLDER PHONE	(817) 233 1999		Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	МІ	Receipt # Amount \$
NAME	NICKNAME LAST		Date Processed
	pi perd		Date Imaged
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY; STATE;	ZIP CODE
ADDRESS	1511 W. Second Street	+ ARI. TX	76013
(Residence or Business)	1211 An. 26 Gove 21	27 111-21	, -
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER (8(7) 371-118	EXTENSION	
PHONE	(8(7) 371 - 118	,	0
9 REPORT TYPE			
	January 15 30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day before el	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	Month	Day Year
	6 / 1/2019	THROUGH 6 /	/30/2019
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary	Runoff Other Description	
×	6 / 8 /2019 General	Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
	AMLING TON CITY COUNCIL + DISTRIC	75	
	COOK -ID - WIG LAND		
	GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	6NACIO NUNEZ 15 FI	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				
	COMMITTEE TYPE COMMITTEE NAME TREPAC TEXAS ASSOCIATION OF Realture Political Action Committee COMMITTEE ADDRESS P.O. BOX 2246 AUSTIN, TX 78768-2246				
Additional Pages	COMMITTEE CAMPAIGN TREASURER NAME Pe burah Spangler COMMITTEE CAMPAIGN TREASURER ADDRESS P.O. DOX 2246				
	1.0. DONATE 78718-224				
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1550			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1550			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 39.76				
	4. TOTAL POLITICAL EXPENDITURES	\$ 4876.42			
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 455,49			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ O			
18 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. Notary Public, State of Texas Comm. Expires 02-08-2023 Notary ID 130107828 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 STAM		15-Kh			
Sworn to and subsci	cribed before me, by the said	, this the			
Mambel Padron Maribel Padron Admin Aide					
Signature of officer a	administering oath Printed name of officer administering oath	itle of officer administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Cor	nmission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1550
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ O
4.	SCHEDULE E: LOANS	s 2 000
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4836.66
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 7346000
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	\$ 2000
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	\$

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME JENACIO NUNEZ	3 Filer ID (Ethics Commission Filers)
5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ions)
Date Full name of contributor Contributor address; City; State; Zip Code Po, Box 2246 Austral, Tx 78768-138	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instruct	ions)
Principal occupation / Job title (See Instructions) Full name of contributor	Amount of contribution (\$) 50.00
Date Full name of contributor out-of-state PAC (ID#:) Contributor address; City: State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE if contributor is out-of-state PAC, please see instruction guide for additional r	EDEO

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Consulting Expense Contributions/Donations Made By	Gilt/Awar	verage Expense rds/Mernorials Expense	Polling Exper Printing Expe Selerice/Man		Travel Out Of District Other (enter a category not listed above)
Candidate/Officeholder/Political Credit Card Payment	Committee Legal Se	rvices struction Guide expla			
					3 Filer ID (Ethics Commission Filers)
Total pages Schedule F1:	2 FILER NAME	IGNACIO	MANE.	2	
Date	5 Payee name	Ethel La	du		
6-7-19		City; State;	-		
Amount (\$)	7 Payee address;	Oity, Oidio,			
103.26					
	(a) Category (See Cat	egories listed at the top of t	his schedule)	(b) Description	outside of Texas. Complete Schedule T.
PURPOSE		t tra	ļ		in, TX, officeholder living expense
OF EXPENDITURE	Frans	portation			
ONLY # direct	Candidate / Of	ficeholder name		Office sought	Office held
Complete ONLY if direct expenditure to benefit C/O					
Date	Payee name	(r.	1	
6-8-19	Draftt	toole (J.		رد	
Amount (\$)	Payee address;				
138.40	400 €	. Abram,	ARL, T	× 7601	6
	Category (See C	ategories listed at the top of	this schedule)	Description	
	_	Expense			outside of Texas. Complete Schedule T.
PURPOSE OF	Food			Check if Aus	stin, TX, officeholder living expense
EXPENDITURE	1				
	Candidate / C	officeholder name		Office sought	Office held
Complete ONLY if direct expenditure to benefit C/C		_			
Date	Payee name			0	
6-4-11	DIGIT	AL CORPU	RATE C	OMPONIES	
Amount (\$)	Payee address	; City; State	e; Zip Code	1 1	19 76015
1820.00	80 (5	atron DR,	ARL,	1 × 2 +	76015
	Category (See	Categories listed at the top	of this schedule)	Description	
PURPOSE					el outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
OF EXPENDITURE	Pri	nting		L Check if A	nzur, IV, Aucaroider Hand avbarea
Ert Elter Give					
	Candidate /	Officeholder name	, _ , , 	Office sough	t Office held
Complete ONLY if direct expenditure to benefit Ca					
	ATTAC	H ADDITIONAL CO	PIES OF THIS	SCHEDULE AS	NEEDED
I	A1 1801				Designal Olo

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Deviand 0/0/004E

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Contributions/Donations Made By Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Legal Services 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 IGNACIO NUNEZ 7 Payee address; City; State; Zip Code 6-7-19 6 Amount (\$) 312 Creekwood Prive, Sunnyvale, TX 75182 2775 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 ___ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Polling Expense Check if Austin, TX, officeholder living expense OF EXPENDITURE Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Pavee name Date City; State; Zip Code Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) Description 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 Payee name Date Amount (\$) City; State; Zip Code Payee address; 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** Office held Candidate / Officeholder name Office sought Complete **QNLY** if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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Francisco de la Contrata Paletra Armania de la

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Accounting/Banking Consulting Expense Contributions/Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel Out Of District Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Other (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) IBNACIO NUNEZ 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date 6 Payee name CRAIG OUNBY 8 Pavee address; City; State; Zip Code 7 Amount (\$) 7106 LighthouseRd, ARLINGTON TX 76002 2000.00 TYPE OF Non-Political EXPENDITURE (a) Category (See Categories listed at the top of this schedule) 10 (b) Description PURPOSE Check if travel outside of Texas. Complete Schedule T. CONSULTING OF EXPENDITURE Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Office held Candidate / Officeholder name Office sought expenditure to benefit C/OH Date CINDY Greene Amount (\$) Payee address; City; State; Zip Code P.O. Box 122594, ARLINGTON TX 76013 5346,00 TYPE OF Non-Political EXPENDITURE Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. CONSULTING PURPOSE TRAVEL IN MITRICI Check if Austin, TX, officeholder living expense EXPENDITURE CONTRACT LABOR Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED