

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 (Ethics Commission Filers)	2 Total pages filed: <div style="font-size: 24pt; text-align: center;">14</div>														
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">MS / MRS / MR</td> <td style="width:30%;">FIRST</td> <td style="width:30%;">MI</td> </tr> <tr> <td>Mr.</td> <td>James</td> <td>C</td> </tr> <tr> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td>Valadez</td> <td></td> </tr> </table>		MS / MRS / MR	FIRST	MI	Mr.	James	C	NICKNAME	LAST	SUFFIX		Valadez		OFFICE USE ONLY <div style="font-size: 18pt; border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> OCC RECEIVED AT OCT 9 '18 PM 4:55 </div>		
	MS / MRS / MR	FIRST	MI														
Mr.	James	C															
NICKNAME	LAST	SUFFIX															
	Valadez																
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address																	
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ADDRESS / PO BOX;</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:20%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:30%;">ZIP CODE</td> </tr> <tr> <td>54 Waller St.</td> <td></td> <td>Austin, TX</td> <td></td> <td>78702</td> </tr> </table>		ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	54 Waller St.		Austin, TX		78702						
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE													
54 Waller St.		Austin, TX		78702													
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">AREA CODE</td> <td style="width:40%;">PHONE NUMBER</td> <td style="width:30%;">EXTENSION</td> </tr> <tr> <td>(512)</td> <td>695-8430</td> <td></td> </tr> </table>		AREA CODE	PHONE NUMBER	EXTENSION	(512)	695-8430		Date Received Date Hand-delivered or Date Postmarked								
AREA CODE	PHONE NUMBER	EXTENSION															
(512)	695-8430																
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">MS / MRS / MR</td> <td style="width:30%;">FIRST</td> <td style="width:30%;">MI</td> </tr> <tr> <td>Mrs.</td> <td>Beth</td> <td></td> </tr> <tr> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td>Beall</td> <td></td> </tr> </table>		MS / MRS / MR	FIRST	MI	Mrs.	Beth		NICKNAME	LAST	SUFFIX		Beall		Receipt # Amount \$		
	MS / MRS / MR	FIRST	MI														
	Mrs.	Beth															
NICKNAME	LAST	SUFFIX															
	Beall																
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		Date Processed Date Imaged															
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:20%;">CITY;</td> <td style="width:10%;">STATE;</td> <td style="width:30%;">ZIP CODE</td> </tr> <tr> <td>1400 E 4th St.</td> <td></td> <td>Austin, TX</td> <td></td> <td>78702</td> </tr> </table>		STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	1400 E 4th St.		Austin, TX		78702						
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AREA CODE	PHONE NUMBER	EXTENSION															
(512)	845-0269																
9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input checked="" 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)						
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<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)														
10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> <td style="width:20%;"></td> <td style="width:15%;">Month</td> <td style="width:10%;">Day</td> <td style="width:15%;">Year</td> </tr> <tr> <td>07</td> <td>01</td> <td>2018</td> <td style="text-align: center;">THROUGH</td> <td>09</td> <td>27</td> <td>2018</td> </tr> </table>			Month	Day	Year		Month	Day	Year	07	01	2018	THROUGH	09	27	2018
Month	Day	Year		Month	Day	Year											
07	01	2018	THROUGH	09	27	2018											
11 ELECTION	ELECTION DATE Month: 11 / Day: 06 / Year: 2018		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special														
	12 OFFICE OFFICE HELD (if any)																
13 OFFICE SOUGHT (if known) Austin City Council District 3																	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

15 Filer 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

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 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)

\$ 6,218.32

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 3,104.83

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

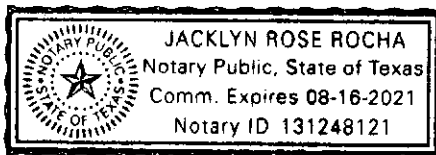
\$ 29,385.84

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

James Valadez
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said James Valadez, this the 9th day of October, 20 18, to certify which, witness my hand and seal of office.

Jacklyn Rocha
Signature of officer administering oath

Jacklyn Rocha
Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

James Valadez

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,218.32
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,104.83
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE 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: 8
2 FILER NAME James Valadez		3 Filer ID (Ethics Commission Filers)
4 Date 7/20/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Aleshire 6 Contributor address; City; State; Zip Code 3605 Shady Valley Dr. Austin, TX 78739	7 Amount of contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 8/24/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Bailey Contributor address; City; State; Zip Code 4104 Turkey Creek Dr. Austin, TX 78730	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 8/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Grube Contributor address; City; State; Zip Code 1910 West Cypress Point Austin, TX 78746	Amount of contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 9/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Hernandez Contributor address; City; State; Zip Code 1507 1/2 Holly St. Austin, TX 78702	Amount of contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8**2** FILER NAME

James Valadez

3 Filer ID (Ethics Commission Filers)**4** Date

9/19/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Clint Small

6 Contributor address;

City; State; Zip Code

4203 Venado Drive

Austin, TX 78731

7 Amount of contribution (\$)

\$210.84

8 Principal occupation / Job title (See Instructions)

Home Builder

9 Employer (See Instructions)

Self

Date

9/24/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Leslie Thompson

Contributor address;

City; State; Zip Code

1403 Holly St.

Austin, TX 78702

Amount of contribution (\$)

\$210.84

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

9/25/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Don Leighton-Burwell

Contributor address;

City; State; Zip Code

1417 Palo Duro

Austin, TX 78757

Amount of contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Architect

Employer (See Instructions)

Self

Date

8/31/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Covert

Contributor address;

City; State; Zip Code

3402 South Hill

Austin, TX 78703

Amount of contribution (\$)

\$350.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME James Valadez		3 Filer ID (Ethics Commission Filers)
4 Date 8/31/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloria Rocha 6 Contributor address; City; State; Zip Code 2216 Eastside Drive Austin, TX 78704	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedro Mercado Contributor address; City; State; Zip Code 22129 Silvia Drive Elgin, TX 78621	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teresa Mercado Contributor address; City; State; Zip Code 22129 Silvia Drive Elgin, TX 78621	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Maryarsa Contributor address; City; State; Zip Code 11636 Schriber Buda, TX 78610	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME James Valadez		3 Filer ID (Ethics Commission Filers)
4 Date 8/31/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter McMillan 6 Contributor address; City; State; Zip Code 1407 Cullen Austin, TX 78757	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Appraiser		9 Employer (See Instructions) Self
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Terwelp Contributor address; City; State; Zip Code 5812 Buckpasser Cove Austin, TX 78746	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Crenshaw Contributor address; City; State; Zip Code PO Box 50568 Austin, TX 78763	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Professional Golfer		Employer (See Instructions) Self
Date 8/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Phillips Contributor address; City; State; Zip Code 8709 Salem Ave Lubbock TX 79424	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8**2** FILER NAME

James Valadez

3 Filer ID (Ethics Commission Filers)**4** Date

8/31/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Gene Bagwell

7 Amount of contribution (\$)

\$300.00

6 Contributor address;

City; State; Zip Code

625 Pioneer Trail

San Marcos, TX 78666

8 Principal occupation / Job title (See Instructions)

Cemetery Maintenance

9 Employer (See Instructions)

Self

Date

8/31/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rebecca Baylor

Amount of contribution (\$)

\$200.00

Contributor address;

City; State; Zip Code

1204 Challenger

Lakeway, TX 78734

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

8/31/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sheri Cowan

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

11004 Alhambra Dr

Austin, TX 78759

Principal occupation / Job title (See Instructions)

Mortgage Lender

Employer (See Instructions)

Bancorp South

Date

8/31/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Kinton

Amount of contribution (\$)

\$350.00

Contributor address;

City; State; Zip Code

10900 Catskill Trail

Austin, TX 78729

Principal occupation / Job title (See Instructions)

Physician

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A1

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8**2** FILER NAME

James Valadez

3 Filer ID (Ethics Commission Filers)**4** Date

7/2/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Stephen Eiland

6 Contributor address;

2907 Overdale Rd

City; State; Zip Code

Austin, TX 78723

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

Surveyor

9 Employer (See Instructions)

Self

Date

9/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Traci Armstrong

Contributor address;

5401 Daimler Drive

City; State; Zip Code

Austin, TX 78744

Amount of contribution (\$)

26.63

Principal occupation / Job title (See Instructions)

Manager

Employer (See Instructions)

Texas Coffee Traders

Date

9/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Todd Brown

Contributor address;

1500 Royal Crest Dr. Apt 156

City; State; Zip Code

Austin, TX 78741

Amount of contribution (\$)

\$105.58

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

9/27/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Abel Rodriguez

Contributor address;

4717 Interlachen Ln

City; State; Zip Code

Austin, TX 78747

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8**2** FILER NAME

James Valadez

3 Filer ID (Ethics Commission Filers)**4** Date

9/27/2018

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Jason Rodriguez

6 Contributor address;

City; State; Zip Code

4717 Interlachen Ln

Austin, TX 78747

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

Real Estate

9 Employer (See Instructions)

Self

Date

9/27/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patricia Sprinkle

Contributor address;

City; State; Zip Code

1114 Fieldcrest

Austin, TX 78704

Amount of contribution (\$)

\$52.95

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

9/26/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sheri Cowan

Contributor address;

City; State; Zip Code

1104 Alhambra Dr.

Austin, TX 78759

Amount of contribution (\$)

\$150.00

Principal occupation / Job title (See Instructions)

Mortgage Lender

Employer (See Instructions)

Bancorp South

Date

9/27/2018

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Emily Romero

Contributor address;

City; State; Zip Code

2201 Bridle Path

Austin, TX 78703

Amount of contribution (\$)

\$350.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
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.

1 Total pages Schedule F1:	2 FILER NAME James Valadez	3 Filer ID (Ethics Commission Filers)			
4 Date 9/17/2018	5 Payee name Squarespace, Inc.				
6 Amount (\$) \$28.15	7 Payee address; City; State; Zip Code 225 Varick St. 12th Floor New York, NY 10014				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 8/24/2018	Payee name Worley Printing				
Amount (\$) \$1313.77	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd. Austin, TX 78722				
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			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 8/21/2018	Payee name City of Austin				
Amount (\$) \$500.00	Payee address; City; State; Zip Code 301 W. 2nd St. Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
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.

1 Total pages Schedule F1:	2 FILER NAME James Valadez	3 Filer ID (Ethics Commission Filers)			
4 Date 8/15/2018	5 Payee name Squarespace, Inc.				
6 Amount (\$) \$28.15	7 Payee address; City; State; Zip Code 225 Varick St. 12th Floor New York, NY 10014				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 7/18/2018	Payee name Worley Printing				
Amount (\$) \$624.89	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd. Austin, TX 78722				
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				
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 7/16/2018	Payee name Squarespace, Inc.				
Amount (\$) \$28.15	Payee address; City; State; Zip Code 225 Varick St. 12th Floor New York, NY 10014				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense				
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Candidate / Officeholder name</td> <td style="width: 25%;">Office sought</td> <td style="width: 25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
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.

1 Total pages Schedule F1:	2 FILER NAME James Valadez	3 Filer ID (Ethics Commission Filers)
4 Date 7/10/2018	5 Payee name Worley Printing	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd. Austin, TX 78722	
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
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 9/27/2018	Payee name Stripe.com	
Amount (\$) \$81.72	Payee address; City; State; Zip Code 185 Berry St. Suite 550 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		