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) 00090160	2 Total pages filed: 5			
3 CANDIDATE /	MS / MRS / MR FIRST	MI	OFFICE USE ONLY			
OFFICEHOLDER NAME	Sabino		Date Received			
			ELECTRONICALLY FILED			
	NICKNAME LAST	SUFFIX	. 01/06/2023			
	Renteria					
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; CI	ITY; ZIP CODE	Date Hand-delivered or Date Postmarked			
OFFICEHOLDER MAILING ADDRESS	1511 Haskell Street		Receipt # Amount			
Change of Address	Austin, TX 78702					
			Date Processed			
			Date Imaged			
5 CAMPAIGN	MS / MRS / MR FIRST	MI				
TREASURER NAME	John					
	NICKNAME LAST	SUFFIX				
	Hernandez	JUFFIA				
	hemandez					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	; APT / SUITE #; CITY;	STATE; ZIP CODE			
TREASURER	2117 Barton Hill Dr.	, AFT/SOILE#, CITT,	STATE, ZIF CODE			
ADDRESS						
(Residence or Business)						
	Austin, TX 78704					
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
TREASURER	(512) 789-4800					
PHONE						
8 REPORT						
TYPE	X January 15 30th day before	re election Runoff	15th day after campaign treasurer			
	July 15 Sth day before	e election Exceeded modified	 appointment (officeholder only) Final Report (Attach C/OH-FR) 			
		reporting limit				
9 PERIOD	Month Day Year	Month Day	Year			
COVERED	07/01/2022 7	THROUGH 12/31/202	2			
10 ELECTION	ELECTION DATE	ELECTION TYPE				
		Primary Runoff	Other			
	01/06/2023	General Special				
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT	(if known)			
	Council Member, District 3 Travis		, District 3 Place Austin District			
		district 3				
	I	I				
	GO TO PAGE 2					
Forms provided by Te	exas Ethics Commission www.e	ethics.state.tx.us	Version V3.4.84f8bcf1			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 5

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15 NOTICE 15 NO					
FROM TREEST construct conductases and formation space been made without the candidate's or officeholder's knowledge of construct. Conductases and officeholder's are required to eport this information only if they receive notice of such expenditures.	13 C / OH NAME	Renteria, Sabino			(Ethics Commission File
	POLITICAL	candidate / officeholder.	These expenditures may have been made without t	he candidate's or offi	ceholder's knowledge or
		COMMITTEE TYPE	COMMITTEE NAME		
COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TORAL COMMITMENTEES OF LOANS) COMMITTEE CAMPAIGN TORAL POLITICAL EXPENDITURES COMMITTEE CAMPAIGN TO ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 0.00 COMMITTEE CAMPAIGN TO ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 0.00 COMMITTEE CAMPAIGN TO ALL OUTSTANDING LOANS AS OF THE LAST DAY \$ 0.00 COMMITTEE CAMPAIGN TO ALL OUTSTANDING LOANS AS OF THE LAST DAY COMMITTEE CAMPAIGN TO ALL OUTSTANDING LOANS AS OF THE LAST DAY COMMITTEE CAMPAIGN COMMIT		GENERAL	COMMITTEE ADDRESS		
		SPECIFIC			
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TOTALS LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDEES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00 EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00 GONTRIBUTION BALANCE 3. TOTAL POLITICAL EXPENDITURES \$ 0.00 OUTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 0.00 OUTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE \$ 0.00 OUTSTANDING 6. TOTAL PORTING PERIOD \$ 0.00 \$ 0.00 TOTALS 6. TOTAL PORTING PERIOD \$ 0.00 \$ 0.00 TOTAL STANDING 6. TOTAL PORTING PERIOD \$ 0.00 \$ 0.00 TOTAL ACTIONAL OF THE REPORTING PERIOD Iswear, or affirm, under penalty of periury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. \$ \$ 0.00 Support Status of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE			COMMITTEE CAMPAIGN TREASURER ADDRES	S	
Image: Contract of the state of the sta	16 CONTRIBUTION TOTALS			HAN PLEDGES,	\$ 0
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Signature of officer administering		3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITEMIZED	\$ 0
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				, this the	day
				Title of offic	

SUBTOTALS - C/OH			OVEI	FORM C/OH R SHEET PG 3 3 of 5	
18 FIL Re		ME Sabino	19 Filer ID 00090160	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	Х	SCHEDULE E: LOANS		\$	0.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5
2 FILER NAME Renteria, Sabino	3 Filer ID (Ethics Commission Filers) 00090160
⁴ TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date 6 Full name of pledgor out-of-state PAC (ID#:) 7 Pledgor Address; City; State; Zip Code	8 Amount of 9 In-kind description pledge (\$) (If applicable)
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	ctions)

LOANS SCHEDULE E				
The Instruction Guide explains how to complete this form. 1 Total pa Sch: 1/2				
2 FILER NAME Renteria, Sabino	3 Filer ID 00090	e (Ethics Commission 160	on Filers)	
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00	
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:) 9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate		
		11 Maturity Date		
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	ions)			
14 Description of Collateral 15 Check if personal funds None	s were deposite	d into political accou (See Instruction		
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guara	nteed (\$)	
not applicable 18 Guarantor address; City; State; Zip Code				
20 Principal occupation 21 Employer (See Instruct)	ions)			