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	TE / OFFICEHOLDER N FINANCE REPORT	OCT 2 9 201 8	FORM C/OH COVER SHEET PG 1
The C/OH Instruction G	ulde explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER	MS/MRS (MR) FIRST GILBERT PLECILI	MI .	OFFICE USE ONLY
NAME	NICKNAME LAST	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; 3833 DKIFTW60D SACI AZIGFIO, TX 769		OCT 292018
5 CANDIDATE/ OFFICEHOLDER PHONE	ARIEA CODE PHONE NUMBER (325) 617-6173	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MB FIRST BILL WILLIAM	MI	Receipt # Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / S 3829 DLIFTWOOD SALI ALIGELO, TR 76904		ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (325) 223-0617	EXTENSION	
9 REPORT TYPE	January 15 30th day before a		 15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year		Day Year 28 / 18
11 ELECTION	ELECTION DATE Month Day Year Primary 11 6 2018 General	ELECTION TYPE	
12 OFFICE		13 OFFICE SOUGHT (11 KNOWN TOM GLEEN PLECIMIT	4 COULITY COMMISIAICA
	GO TO	PAGE 2	
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		EHOLDER	OCT 2 9 2 018	FORM C/OH OVER SHEET PG 2
14 C/OH NAME	ILBERT 6	ALLEGOS	15 Fit	er ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR N SUPPORT THE CANE	NOTICE OF POLITICAL CONTRIBUTIONS / NDATE / OFFICEHOLDER. THESE EXPEN INSENT. CANDIDATES AND OFFICEHOLD	ACCEPTED OR POLITICAL EXPENDITURES IDITURES MAY HAVE BEEN MADE WITHOUT ERS ARE REQUIRED TO REPORT THIS INFO	THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
_		COMMITTEE CAMPAIGN TREASUR	ER NAME	
Additional Pages		COMMITTEE CAMPAIGN TREASU	RER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF ES, LOANS, OR GUARANTEES (F \$50 OR LESS (OTHER THAN DF LOANS), UNLESS ITEMIZED	\$ _0
		POLITICAL CONTRIBUTION THAN PLEDGES, LOANS, OR (\$\$5,550.00
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF	\$100 OR LESS,	\$ 4,88
	4. TOTAL	POLITICAL EXPENDITURES		\$ 5,332.43
CONTRIBUTION BALANCE	5. TOTAL F	POLITICAL CONTRIBUTIONS MA	AINTAINED AS OF THE LAST DAY	\$ 5,044.01
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OU AY OF THE REPORTING PERIO	TSTANDING LOANS AS OF THE	\$ 🔶
18 AFFIDAVIT	RUDY OLIVAS Notary Public 5 TACE DI EX/ Ay Comm. Exp. 07-18	true a under	ar, or affirm, under penalty of perjury nd correct and includes all informati Title 15, Election Code.	on required to be reported by me
AFFIX NOTARY STAN	/P/SEALABOVE		orginators of Ognotoan	
Sworn to and subso day of <u>0 A</u>	~	by the said <u>Giller</u> to certify which, witness my	-	_, this the 29^{+1}
R Dlink	<u> </u>	Ruby Oliv	as	Elec Coor.
Signature of officer	administering oath	Printed name of office	r administering oath	Title of officer administering oath

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SUBTOTALS - C/OH

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OCT 29 2018

FORM C/OH COVER SHEET PG 3

NAME	20 Filer ID (Ethics Con	nmiss	ion Filers)
			SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,550.00
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$.O
SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	Ð
SCHEDULE E: LOANS		\$	Θ
SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	950.00
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	Φ
SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	÷
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0
SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	\$	4382.43
SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	0
SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	Θ
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$	6
	DULE SUBTOTALS COF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CON SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	DULE SUBTOTALS SOF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: EXPENDITURES MADE FROM PERSONAL FUNDS SCHEDULE G2: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS SCHEDULE F4: EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH SCHEDULE H: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	DULE SUBTOTALS OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE F: LOANS \$ SCHEDULE F: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F2: UNPAID INCURRED MADE BY CREDIT CARD \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G2: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE H: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS \$ RETURNED TO FILER

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FILER NAME	Margaret Marg	his form.	1 Total pages Schedule A1: 2
	GILBERT GALLEGOS		3 Filer ID (Ethics Commission Filere
	Full name of contributor Dout-of-state F TOXIY VILLA KLEAL 6 Contributor address; City; Sta 1820 COLLEGE HILLS SAN		7 Amount of contribution (\$) 3200.00
	tion / Job title (See Instructions)	9 Employer (See Instruct	,
	AUCE AGENT	SECT EMPLOY	EFØ
Date 1019/2018 .	Full name of contributor DWAIN GREGSTON Contributor address; City; Sta 14482 FM 2365 P.OBOX 145 KNICKELB	ate; Zip Code	Amount of contribution (\$) 450.00
Principal occupat	ion / Job title (See Instructions)	Employer (See Instructi	ons)
	RETIRED		
Date 10/23/18	· • •) ite; Zip Code	Amount of contribution (\$) #200.00
	5236 FAIKWAY SAU AU	4 E(0, TR 76904	6.
Principal occupat	LE TI RED / TOM GREFULT	Employer (See Instructi	ons)
Date D 2 6 R		AG (ID#:)	Amount of contribution (\$) A_{100-00}
• •	tion / Job title (See Instructions)	Employer (See Instruct	ons)
	KETIRED/COUSULTMET	1xita	

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Th	e instruction Guide explains how to compl	ete this form.	1 Total pages Schedule A1:
2 FILER NAME	GILBERT CALLEGOS		3 Filer ID (Ethics Commission Filer
4 Date 10/26/18		state PAC (ID#: SAL AUGALO A Socat Grad. State; Zip Code	7 Amount of contribution (\$) 45,000.00
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instr	uctions)
Date	Full name of contributor	state PAC (ID#:) Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occu	upation / Job title (See Instructions)	Employer (See Instru	uctions)
Date	Full name of contributor	state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occ	upation / Job title (See Instructions)	Employer (See Instr	uctions)
Date	Full name of contributor	-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occ	upation / Job title (See Instructions)	Employer (See Instr	uctions)

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POLITICAL FROM POL	EXPENDITURES MADE	OCT 29 2018 SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ow Food/Beverage Expense Polling Ex Y Gift/Awards/Memorials Expense Printing E I Committee Legal Services Salaries/	ayment/Reinbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense pense Travel In District xpense Travel Out Of District Vages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME CILLBERT CALC	
4 Date 10/17/18	5 Payee name GILBERT GALLE	
6 Amount (\$) \$(650.00)	7 Payee address; City; State; Zip Code 3833 BLIFTWOOD SALIANCEL	0. TX 76904
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REIMBULSMELIT FOR EXPROITURES MADE FAM PERSONAL FULIDS	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date [0[27]]8	Payee name GILBERT GALLEGOS	
Amount (\$)	Payee address; City; State; Zip Code 3833 DLIFTWOOS SAZI AHGELU, T	R 76914
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) REIMBURS MERIT FUR ERPEDITURES MADE FROM PERSILA FULLOS	Description Check if travel outside of Texas. Complete Schedule T. 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 TGCCPLETY
Date	Payee name	

Complete ONLY if direct xpenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texa Check if Austin, TX, office	eholder living expense
Amount (\$)	Payee address; City; State; Zip Code		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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OCT 292018

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SCHEDULE G

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	EXPENDITURE CATEGOR	NES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politie Credit Card Payment	Fees Off Food/Beverage Expense Pol By Gift/Awards/Mernonials Expense Prin	In Repayment/Reimbursement ica Overhead/Rental Expense lting Expense aries/Wages/Contract Labor w to complete this form.	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 G:	2 FILER NAME GILBERT GALLEGOS	B	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		/
10/12 2018 6 Amount (\$) \$100.00 Reimbursement from political contributions intended 8	(a) Category (See Categories listed at the top of this schedule	RS	
PURPOSE OF EXPENDITURE	ADUELTISIKIG EXPENSE	Check if travel outsid	e of Texas. Complete Schedule T. X, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	OH Gandidate / Officeholder name DH DILBERT GALLE605	Office sought TECC PLCT4	Office held
Date	Payee name		
10/9/2018	Tom GREEN COUNTY ELEN		
Amount (\$) 44.88	Payee address; City; State; Zip Con 113 WEST BEAU BARD	de .	
Relmbursement from political contributions intended	SALLAUGELO, TR 7690	r4	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule REQUEST FOR INFORMATIN(DATA KEQUEGT	Check if travel outsid	e of Texas. Complete Schedule T. X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name BUBRT CALLEGOS	Office sought TGCC PLCT	Office held 4 H/A
Date 0 8 2018	Payee name INESTEAN POSTELS S	GIGNES & DESIG	NS
Ampunt (\$) 4284.16 Definitions political contributions intended	Payee address; City; State; Zip Con 901 STRAWY KOAD SAXI AGIGUE (O1 TR 76964		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule ADUERTISIUGEX AFFISE	Check if travel outsid	le of Texas. Complete Schedule T. X. officeholder living expense
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	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEED)ED
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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SCHEDULE G

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	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	
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4 Date 16/19/19	5 Payee name ComPARY PLINTRIG		/
6 Amount (\$) 1/038-39 Peimbursement from political contributions	7 Payee address; City; State; Zip Co 3419 KARCHER backer fo SMY HUGELO, TR 76904		
Intended 8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule ADVERTISING EXPENSE	Check if travel outsid	e of Texas. Complete Schedule T. X, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name CILBRT CMLEGOS	Office sought TGCC PLETY	Office held
Date 10/11/18	Payee name SAN AUCELOLIVE, COM	HYDE INTER	METTVE IKIL. V
Amount (\$)	Payee address; City; State; Zip Co		
A, 400.00 Reimbursement from political contributions intended	2001 NI BEAURGARD A SALI ALIGECO, TR 7690		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule ADVERTISICIC EXPECTSE	Check if travel outside	e of Texas. Complete Schedule T. K, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name BH BUSAT CALLE605	Office sought TGCC PRET 4	Office held
Date 10 /16/ 18	Payee name CONEXION HISAMIA/S	AN ANGELD	s
Amount (\$) 4500,00	Payee address; City; State; Zip Co 3/5 WEST AVE D.		
political contributions intended	SAU AUGELO, TR 762	03	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule	e) (b) Description	e of Texas. Complete Schedule T. K, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED	ED

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SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)					
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1 Total pages Schedule G:	2 FILER NA	CKBRT 6	ALLEGOS		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/18	5 Payee nai	ne K. Com W	IX MGMT	Solutions	-
6 Amount (\$) 4 5 . 00 Peimbursement from political contributions intended	7 Payee ad	dress; City; 4784 HFT C	State; Zip Code		
8 PURPOSE OF EXPENDITURE 9 Complete <u>ONLY</u> if direct	Aar	(See Categories listed at the FLT15/46 FX 4F35/7C ate / Officeholder na	PEUSE		le of Texas. Complete Schedule T. X, officeholder living expense Office held
expenditure to benefit C/C		ENTGALLEGO		TECCANET 4	*
Date	Payee nar	ne	Www.mannania.co		
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PURPOSE OF EXPENDITURE		See Categories listed at the		Check if Austin, T	e of Texas, Complete Schedule T. X, officeholder living expense
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

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